

James

E L E M E N T S
OF THE
P R A C T I C E O F P H Y S I C .

THE NEW YORK

THE

LIBRARY OF THE

ELEMENTS
OF THE
PRACTICE OF PHYSIC,
FOR THE USE OF THOSE
STUDENTS
WHO ATTEND THE LECTURES READ ON
THIS SUBJECT
AT GUY'S HOSPITAL.

PRINTED IN THE YEAR

1798

MASS. MEDICAL COLLEGE.

ELEMENTS



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FOR

B
libra

FORMULÆ MEDICAMENTORUM SELECTÆ.

ACIDUM MURIATICUM.

No. 1.

Rx Acid. muriat. gutt. xxx.
Mell. Rosæ, unc. ii.
Decoct. Hord. unc. vi.
Fiat Gargarisma.

ACIDUM NITROSUM.

No. 2.

Rx Acid. nitros. m. dr. i.
Aq. distillat. lib. ii. M.
Bibat æger quotidie, ope tubuli vitrei, a libra una ad
libras duas usque.

ACIDUM VITRIOLICUM.

No. 3.

Rx Infus. Rosæ, unc. vii.
Natr. vitriolat. unc. fs.
Solve et adde,
Spir. Piment. unc. fs.
Capiat cochlearia quatuor, sexta quaque hora.

No. 4.

Rx Acid. vitriol. dilut. dr. ii.

Tinct. Cinchon. comp. unc. ii. M.

Capiat cochlearium unum vel alterum minimum, bis
indies, ex aquæ fontis cyatho.

ACONITUM.

No. 5.

Rx Succ. spissat. Aconit. gr. i.

Glycyrrh. Pulv. gr. ii.

Conserv. Cynosb. q. s.

Fiat Pilula, bis terve indies fumenda.

ALOËS.

No. 6.

Rx Aloës Socotor. in pulv. trit. dr. fs.

Sapon. dr. ifs.

Ol. essent. Caryoph. arom. gutt. iii.

Syr. simpl. q. s. ut fiat massa.

Sint Pilulæ triginta, quarum sumantur quatuor, singulis
noctibus.

No. 7.

Rx Pulv. aloët. cum Ferr. dr. i.

Syr. Zingib. q. s. ut fiant Pil. xvi.

Sumantur quatuor singulis noctibus.

No. 8.

Rx Pulv. aloët. cum Guaiac. scrup. ii.

— antimonial. scrup. i.

Syr. simpl. q. s.

Fiant Pilulæ sedecim, quarum capiat æger duas omni
nocte, hora somni.

No. 9.

R^x Vin. Aloës, unc. iifs.
Spir. Ammon. comp. unc. fs. M.

Capiat cochleare unum pro re nata, ex vehiculo quovis idoneo.

No. 10.

R^x Aloës Socotor. dr. ii.
Lact. nov. vaccin. unc. viii.

Tere simul ut fiat Enema, tepidum injiciendum.

ALUMEN.

No. 11.

R^x Alumin. in pulv. trit. gr. x.
Conf. Rosæ rubr. scrup. i.

Fiat Bolus, bis terve indies sumendus.

No. 12.

R^x Alumin. in pulv. trit. scrup. ii.

Infus. Rosæ, unc. vi.

Mell. Rosæ, unc. i. M. ut fiat Gargarism.

Utatur sæpius in die.

No. 13.

R^x Alumin. ust. in pulv. trit. dr. iii.

Colcoth. vitriol. (Pharm. Edin.) dr. i.

Fiat Pulvis, pauxillo cujus partes affectæ quotidie aspergantur.

AMMONIA.

No. 14.

R^x Ammon. præp. gr. vi.

Tinct. Cardam. comp. dr. i.

Aq. Puleg. dr. xi.
 Syr. Cort. Aurant. dr. i.
 Fiat Haustus, sexta quavis hora capiendus.

No. 15.

R̄ Spir. Ammon. fuccin. gutt. xx.
 Mist. camphorat. dr. xi.
 Spir. Lavend. comp. dr. i. M.
 Fiat Haustus, bis terve quotidie fumendus.

No. 16.

R̄ Spir. Ammon. comp.
 — Lavend. comp.
 Tinct. Castor. singul. unc. i. M.
 Capiat cochleare parvulum, ex pauxillo Aquæ fontanæ,
 sub languore.

No. 17.

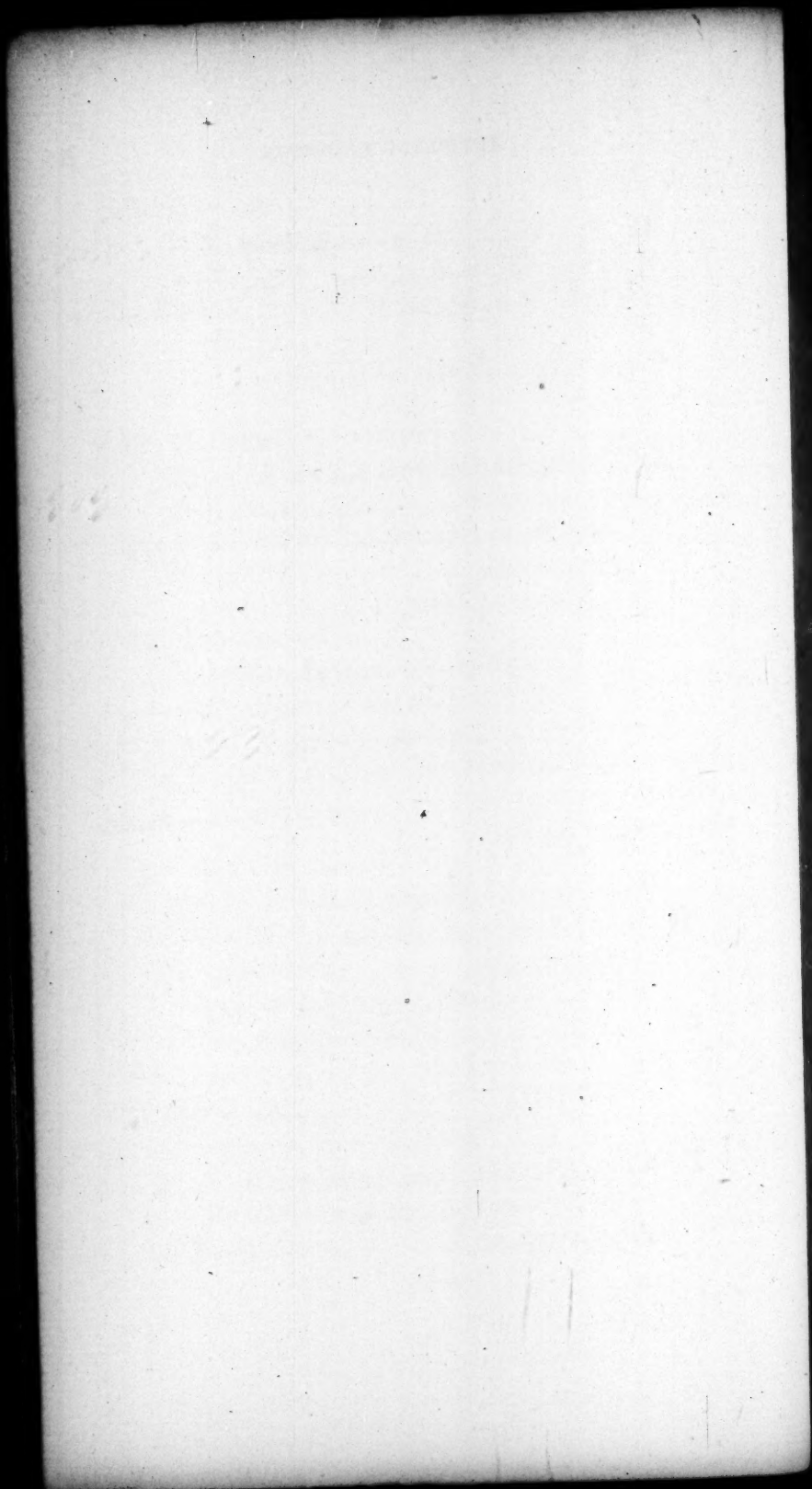
R̄ Liq. volat. Corn. Cerv. gutt. xx.
 Tinct. Colomb. dr. i.
 Aq. Cinnam.
 Aq. distillat. singul. dr. vi. M.
 Fiat Haustus, hora prima pomeridiana et sexta vespertina, quotidie fumendus.

No. 18.

R̄ Aq. Ammon. acetat. unc. vi.
 Spir. vinos. rect. unc. ii. M.
 Fiat Embrocatio.

No. 19.

R̄ Aq. Ammon. acet. unc. ii.
 Vin. Antim. Tart. dr. i.
 Mist. camphorat. unc. iv. M.
 Sumat cochlearia tria, sexta quaque hora.



No. 20.

- ℞ Sal. ammon. in pulv. trit. scrup. ii.
 Aq. distillat. unc. ivfs.
 Spir. Piment. unc. i.
 Syr. Succ. Limon. unc. fs. M.
 Capiat cochlearia tria, ter indies.

No. 21.

- ℞ Sal. ammon. in pulv. trit. dr i.
 Aceti, unc. iv.
 Spir. vinos. ten. unc. ii.
 Spir. camph. dr. i.
 Fiat Epithema liquidum.

AMMONIACUM.

No. 22.

- ℞ Ammoniac. Gum. in pulv. trit.
 Scill. recent. singul. dr. fs.
 Simul contunde, ut fiant Pilulæ duodecim.—Sumat
 tres, bis terve quotidie.

No. 23.

- ℞ Lact. Ammoniac. unc. v.
 Oxymell. Scill.
 Tinct. Opii camph. singul. unc. fs. M.
 Capiat cochlearia duo, sexta quaque hora.

ANGUSTURÆ CORTEX.

No. 24.

- ℞ Cort. Angust. contus. dr. ii.
 — Aurant. Hisp. dr. i.
 Aq. fervent. lib. i.

Macera et cola.

Infus. colat. dr. xi. adde,

Tinct. Cardam. comp. dr. i. M.

Sit Haustus, ter quotidie sumendus.

ANTIMONIUM.

No. 25.

R $\&$ Antimon. præp.

Hydr. cum Sulphur. singul. scrup. i.

Syr. Aurant. Cort. q. s.

Fiat Bolus, bis die sumendus.

No. 26.

R $\&$ Pulv. antimonial. gr. iii.

Camphor. (ope pauxill. spir. vinos.
rect. in pulv. trit.) gr. vii.

Conserv. Cynosb. q. s.

Fiat Bolus, sexta quaque hora sumendus.

No. 27.

R $\&$ Kali præp. dr. ii.

Succ. Limon. q. s. ut ritè faturetur alkali.

Vin. Antim. tart. dr. ii.

Aq. distillat.

— Cinnam. singul. unc. ii.

Syr. simpl. dr. ii. M.

Sit Julepum, cujus æger capiat cochlearia tria, quarta
quavis horâ.

No. 28.

R $\&$ Vitri Antimon. cerat. (Ph. Ed.) dr. fs.

Confect. opiat. q. s.

Sint Pilulæ decem, quarum sumat unam bis quotidie.

ad
div

co
ex

No. 29.

- R Antimon. tart.
Opii purificat.
Calomel. singul. in pulv. trit. gr. ʒ.
Conserv. Rosæ rubr. q. s.

Fiant Pilulæ decem, unam quarum capiat omni nocte.

No. 30.

- R Vin. Antimon. gutt. xxx.
Tinct. Opii camphorat. dr. iss.
Aq. distillat. dr. x.
Syr. Papav. alb. dr. fs. M.

Sit pro Haustu hora somni.

ARGENTUM.

No. 31.

- R Argent. nitrat. gr. iii.

Solve terendo in Aquæ distillatæ guttis aliquot, et adde Micæ Panis q. s. ut fiat massa, in Pilulas viginti dividenda. Sumat duas vel tres bis die.

ARSENICUM.

No. 32.

- R Arsen. alb. præp.
Kali præp. singul. gr. ʒ.
Aq. distillat. unc. ii.

Solve coquendo in vase vitreo, et liquorem frigesactum cola. Sit dosis a guttis duabus ad guttas viginti usque, ex Aquæ fontanæ cyatho, bis terve quotidie.

A R U M.

No. 33.

- R Ari Rad. recent.
Arab. Gum. Pulv. singul. scrup. iv.

Sperm. Ceti, scrup. ii.

Aq. Puleg. unc. viifs.

Syr. simp. dr. iii.

Terendo in mortario marmoreo fiat Emulsio, cujus
capiat cochlearia duo vel tria, bis terve indies.

ASA FÆTIDA.

No. 34.

Pilul. Galban. comp.

Dosis a granis decem ad scrupulum unum, bis quotidie.

No. 35.

R Lact. Afæ fœtid. unc. vfs.

Spir. Lavend. comp. unc. fs.

— Ammon. comp. dr. ii. M.

Sumat ter quotidie cochlearia tria.

No. 36.

R Lact. Afæ fœtid. unc. viii.

Tinct. Opii, dr. i. M.

Pro Enemate hora somni injiciatur.

ASARUM.

No. 37.

R Pulv. Asar. comp. quantum vis.

Hauriatur tantillum naribus, ut sternutatio excitetur.

BALSAMUM CANADENSE.

No. 38.

R Balf. Canad. dr. iii.

Vitell. Ovi. q. s.

Probé subactis, admisce sensim,

us.

c.

Mell. despumat. dr. iii.

Aq. Cinnam. unc. iii.

Sumat æger, quolibet quadrihorio, cochleare unum;
semper autem ante usum concutiat lagena.

BALSAMUM COPAIVA.

No. 39.

Rx Balf. Copaiv.

Oliban. in pulv. trit. singul. dr. ii.

Conf. Cynosb. unc. fs. M.

Fiat Electuarium, de quo, bis terve in die, ad nucis
moschatæ magnitudinem capiatur.

No. 40.

Rx Balf. Copaiv.

Spir. vinos. rectif. singul. part. æqual. M.

Capiat guttas quadraginta, ter de die, ex Lactis novi
cyatho.

BALSAMUM PERUVIANUM.

No. 41.

Rx Ol. Amygdal. unc. i.

Balf. Peruv. dr. ii.

Syr. Alth. unc. fs.

Vitell. Ovi unius.

Bene terantur simul, dein sensim admisceantur,

Aq. Font. unc. vi.

Capiat bis die unciam unam.

BELLADONNA.

No. 42.

Rx Belladon. Folior. exsiccat. dr. fs.

Aq. fervent. unc. xii.

Macera in vase operto, et liquorem cola; infusi colati
unciis septem addens,

Tinct. Cardam. comp. unc. i.

Capiat cochlearia duo, ter de die, et sensim dosis
augeatur.

BORAX.

No. 43.

R Borac. in pulv. trit. dr. i.

Mell. despumat. unc. i. M.

Fiat Ecligma, quocum fauces et lingua sæpius obliniantur.

CALX.

No. 44.

R Aq. Calc.

Lact. nov. vaccina. singulor. lib. i. M.

Bibatur partitis vicibus, et quotidie repetatur.

No. 45.

R Aq. Calc.

Ol. Oliv. singulor. unc. iifs.

Spir. vinos. rectific. unc. fs.

Fiat Linimentum.

CAMPHORA.

No. 46.

R Camphor. (guttis aliquot Spir. vinos. rect. in
pulverem redactæ) gr. viii.

Pulv. antimonial. gr. iii.

Conserv. Aurant. Cortic. q. s.

Fiat Bolus, ex Seri Lactis poculo, sexta quaque hora
capiendus.

No. 47.

℞ Camphor.
Castor. Russic.
Mosch. singul. in pulv. tritor. gr. v.
Syr. Papav. alb. q. s.

Fiat Bolus, ter de die sumendus.

No. 48.

℞ Kali præp. scrup. i.
Succi Limon. unc. fs.
Mist. camphorat. dr. xii. M. ut fiat Haustus

quarta quavis hora sumendus.

Haustui nocturno addantur, Tinct. opii, guttæ viginti,
vel Mithridat. drachma dimidia.

No. 49.

℞ Mist. camphorat. unc. vi.
Aq. Ammon. acetat. unc. ii. M.

Sumat cochlearia quatuor, sexta quaque hora.

No. 50.

℞ Liniment. Sapon. compos. unc. iifs.
Tinct. Opii, unc. fs M.

Hujus tantillo, bis in die, pars affecta obliniatur.

CANTHARIS.

No. 51.

℞ Cantharid. in pulver. subtil. trit. gr. fs.

Micæ Panis quant. fat. fit ut fiat Pilula mane nocteque
sumenda, et prout symptomata se habeant, cautè augeatur
dosis ad grana duo vel tria quotidie.

No. 52.

R Tinct. Cantharid. dr. vi.
Tinct. Opii camphorat. dr. ii. M.

Sumantur a guttis viginti ad octoginta, vel centum
usque, ex Decocto Hordei, bis terve indies.

No. 53.

R Linim. Sapon. comp. unc. iſs.
Tinct. Cantharid. unc. ſs. M.

Fiat Linimentum, quo pars dolens fricetur.

CASCARILLA.

No. 54.

R Cascarill. Cortic. contus. unc. ſs.
Aq. fervent. unc. xii.

Macera per horas sex, liquorem frigeſactum cola, et
colati unciis ſeptem adde,

Tinct. Cortic. ejuſdem, unc. i.

Capiat, ter quaterve indies, cochlearia quatuor.

CASTOREUM.

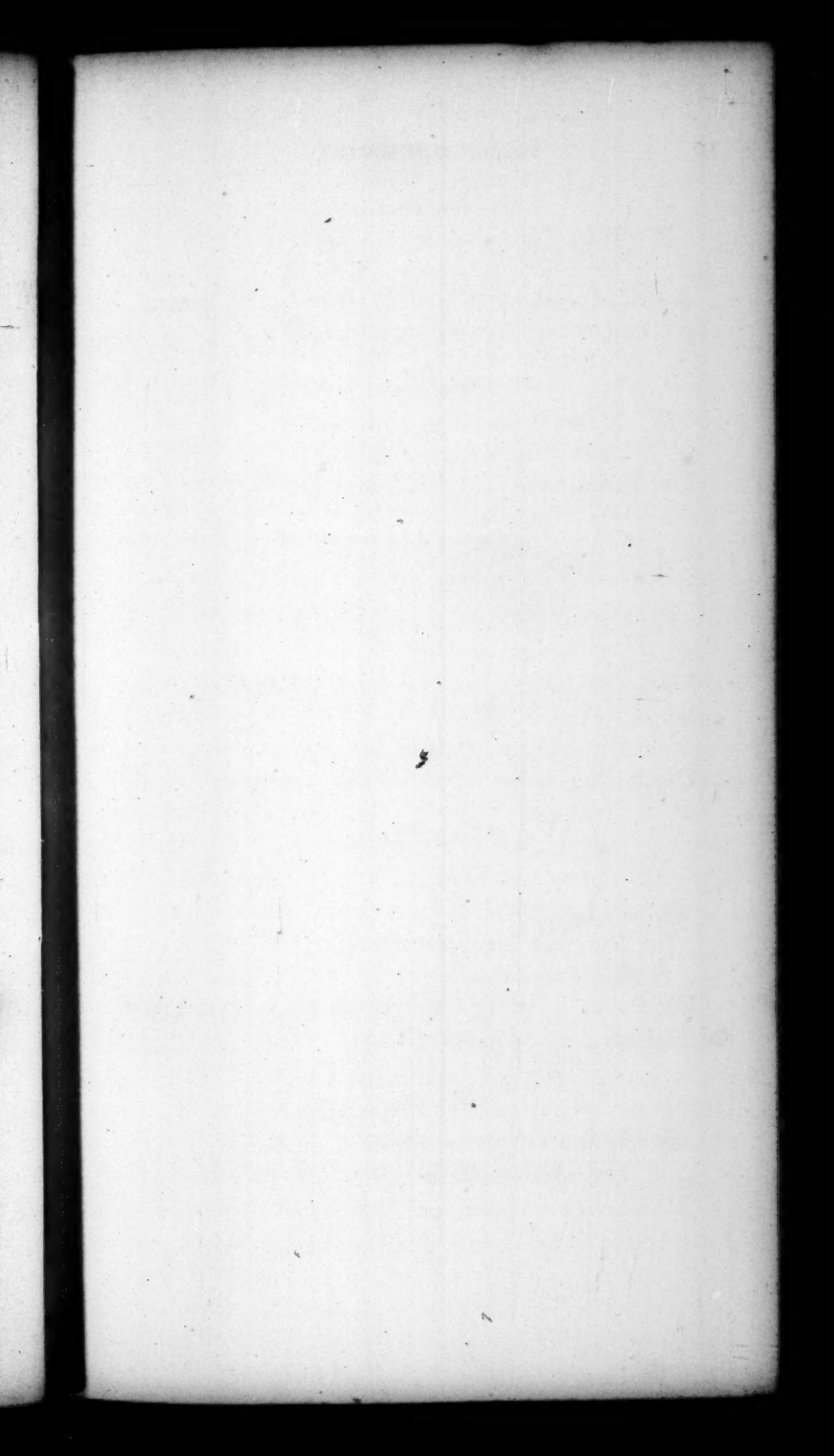
No. 55.

R Caſtor. Ruſſic, in pulv. trit.
Mithridat. ſingulor. ſcrup. i.
Syr. ſimpl. q. s.

Fiat Bolus, quem capiat æger bis die; ſuperbibens
Miſturæ camphoratæ cochlearia tria.

No. 56.

R Miſtur. camphorat. dr. x.
Tinct. Caſtor. dr. i,





Spir. Lavendul. comp. dr. fs.

Sit Haustus, quamprimùm fumendus, et, urgente paroxysmo, post horas duas repetendus.

CATECHU.

No. 57.

R̄ Catech. in pulv. trit. scrup. i.

Confect. opiat. gr. x.

—— aromat. quant. sat. fit.

Fiat Bolus, bis terve in die fumendus.

No. 58.

R̄ Mist. cretac. unc. vi.

Tinct. Catech. unc. i. vel

—— Kino unc. fs.

Confect. opiat. dr. i. M.

Capiat, post singulas dejectiones liquidas, cochlearia duo vel tria, concusso prius vitro.

No. 59.

Electuarium Catechu (Pharm. Edin.)

Dosis a scrupulis duobus ad scrupulos quinque.

CHAMÆMELUM.

No. 60.

R̄ Chamæm. Flor. in pulv. trit. scrup. i.

Myrrh. Pulv. gr. v.

Rhabarb. Pulv. gr. iii.

Fiat Pulvis, vel Syrupus simplice Bolus, bis de die capiendus.

No. 61.

- Rx Chamæm. Flor. unc. iv.
Lavend. Flor. unc. i
Ror. marin. Cacumin. unc. ii.

Conscissa, tusa, mista, sindoneque infusa, et in aqua fervida calefacta, epigastrio applicentur.

CICUTA.

No. 62.

- Rx Succ. Cicut. spissat. gr. iii.
Pulv. Trag. comp. dr. i.

Simul terantur, et in portiones sex æquales dividantur; quarum sumat unam bis in die. Cicutæ dosin paulatim augeri licet, pro re nata.

No. 63.

- Rx Succ. Cicut. spissat. dr. i.

Herb. Cicut. exsiccat. in pulv. trit. quant. sat. sit ad massam pilularem fingendam. Fiant Pilulæ triginta, quarum unam primò, dein plures, aucto illarum pro re nata numero, singulis diebus sumat.

No. 64.

- Rx Cicut. Herb. exsiccat.
Chamæm. Flor. singul. unc. i.
Aq. fervent. lib. i.

Coque per sextam horæ partem, et liquori expresso adde,

Farin. Lin. Semin. quant. sat. sit ut fiat Cataplasma.

Parti dolenti calidum, et pauxillo olei olivæ illinitum, applicetur, ac renovetur bis die.

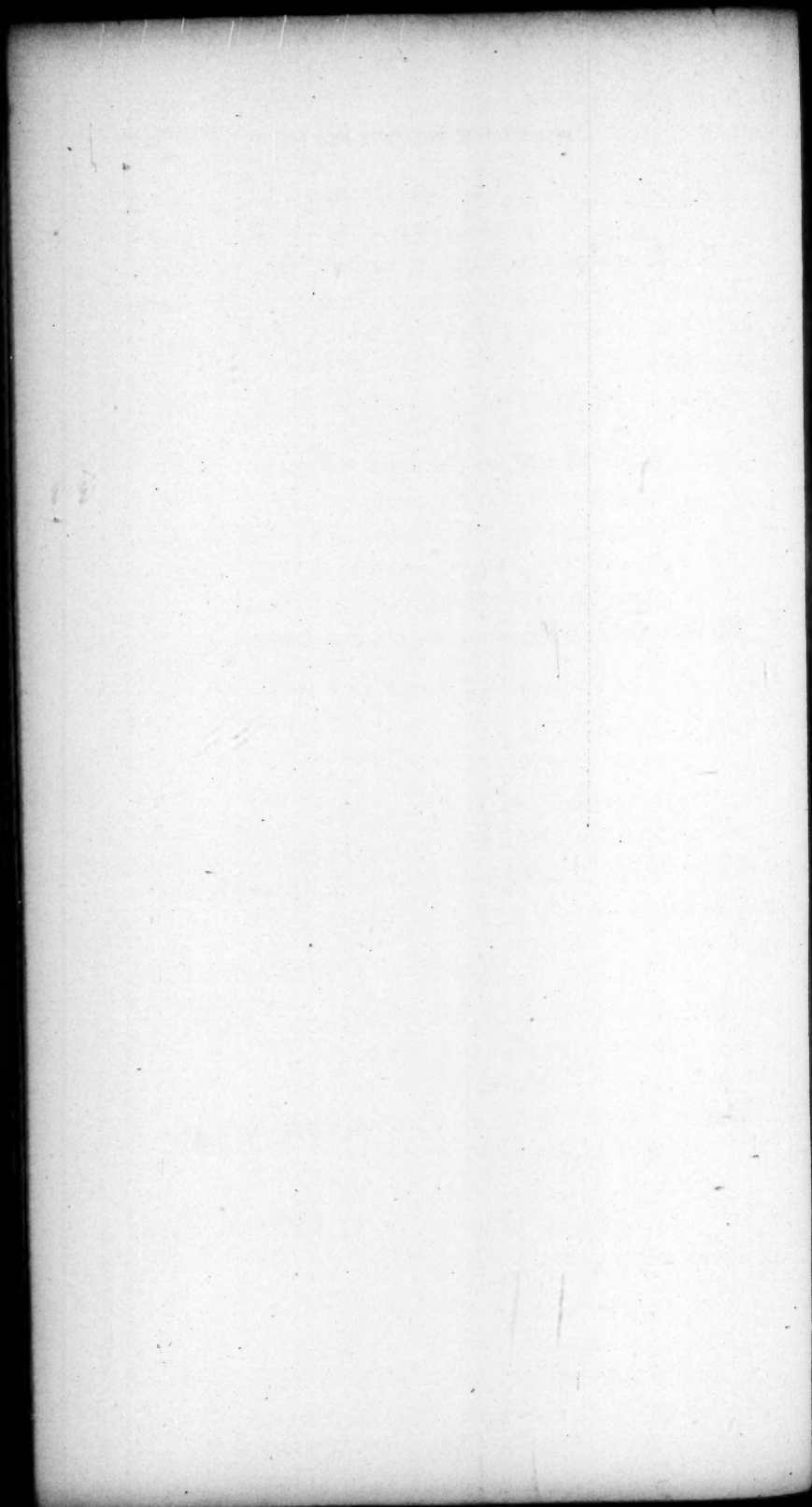
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CINCHONA.

No. 65.

Rx Cinchon. flav. in pulv. trit. dr. iii.

Divide in partes duodecim æquales, quarum capiat unam in horas ex Lactis vaccini cyatho, absente paroxysmo.

No. 66.

Rx Cinchon. flav. in pulv. trit. scrup. i.

Serpentar. Virginian. Pulv. gr. x. vel

Cascarill. Cortic. Pulv. gr. x.

Aq. distillat. dr. xi.

Syr. Zingib. dr. i. M.

Sit Haustus, quarta quaque horâ capiendus.

No. 67.

Rx Decoct. Cinchon. unc. vi.

Tinct. ejusdem comp. unc. i.

Acid. vitriolic. dilut. dr. i.

Syr. Aurant. Cortic. unc. fs. M.

Hujus Misturæ cochlearia quatuor, horis duabus interpositis, capienda.

No. 68.

Rx Cinchon. flav. in pulv. crass. contus. unc. fs.

Rosar. rubr. exsiccat. dr. ii.

Aq. fervent. unc. xii.

Macera in vase idoneo, et liquorem frigesactum cola.

Infus. colat. unc. vii. adde,

Acid. vitriolic. dilut. dr. i. et

Syr. simpl. unc. fs. ut fiat Mistura, cujus cyathum bibat quarta quaque horâ.

No. 69.

Rx Cinchon. rubr. in pulv. trit. unc. i.
Chamæm. Flor. Pulv. unc. fs.
Ferr. Rubigin. dr. ifs.
Syr. Aurant. Cort. q. s.

Fiat Electuarium, de quo sumat nuclei fructûs myristicæ
instar, ter quotidie.

No. 70.

Rx Extract. Cinchon. moll. dr. ifs.
Ferr. vitriolat. in pulv. trit. scrup. i.
Syr. simpl. si opus fuerit ad massam fingendam.

Fiant Pilulæ triginta, quarum tres mane meridie vespere
que sumantur.

No. 71.

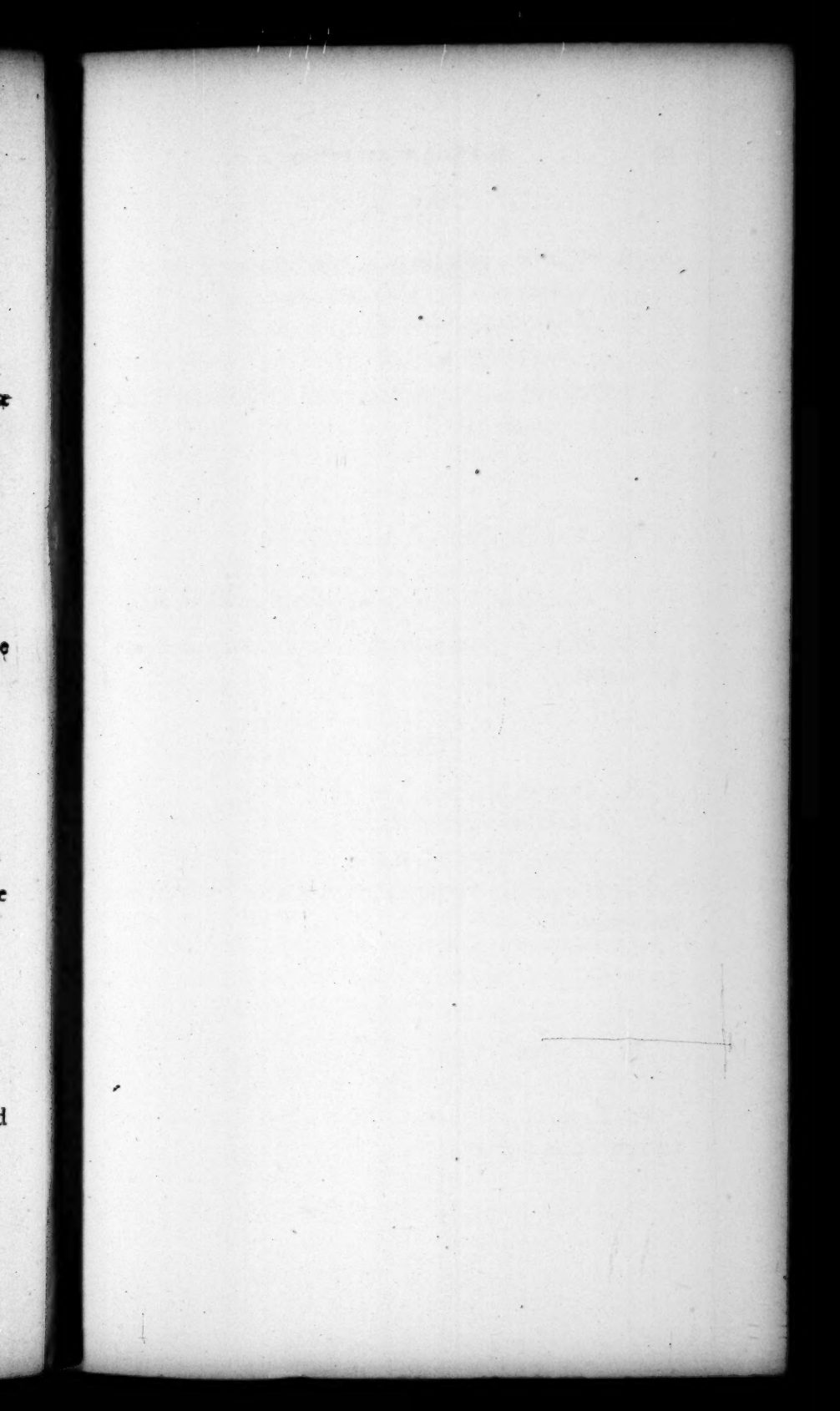
Rx Decoct. Cinchon. unc. vi.
Acid. vitriolic. dilut. dr. i.
Mell. Rosæ, unc. i. M.

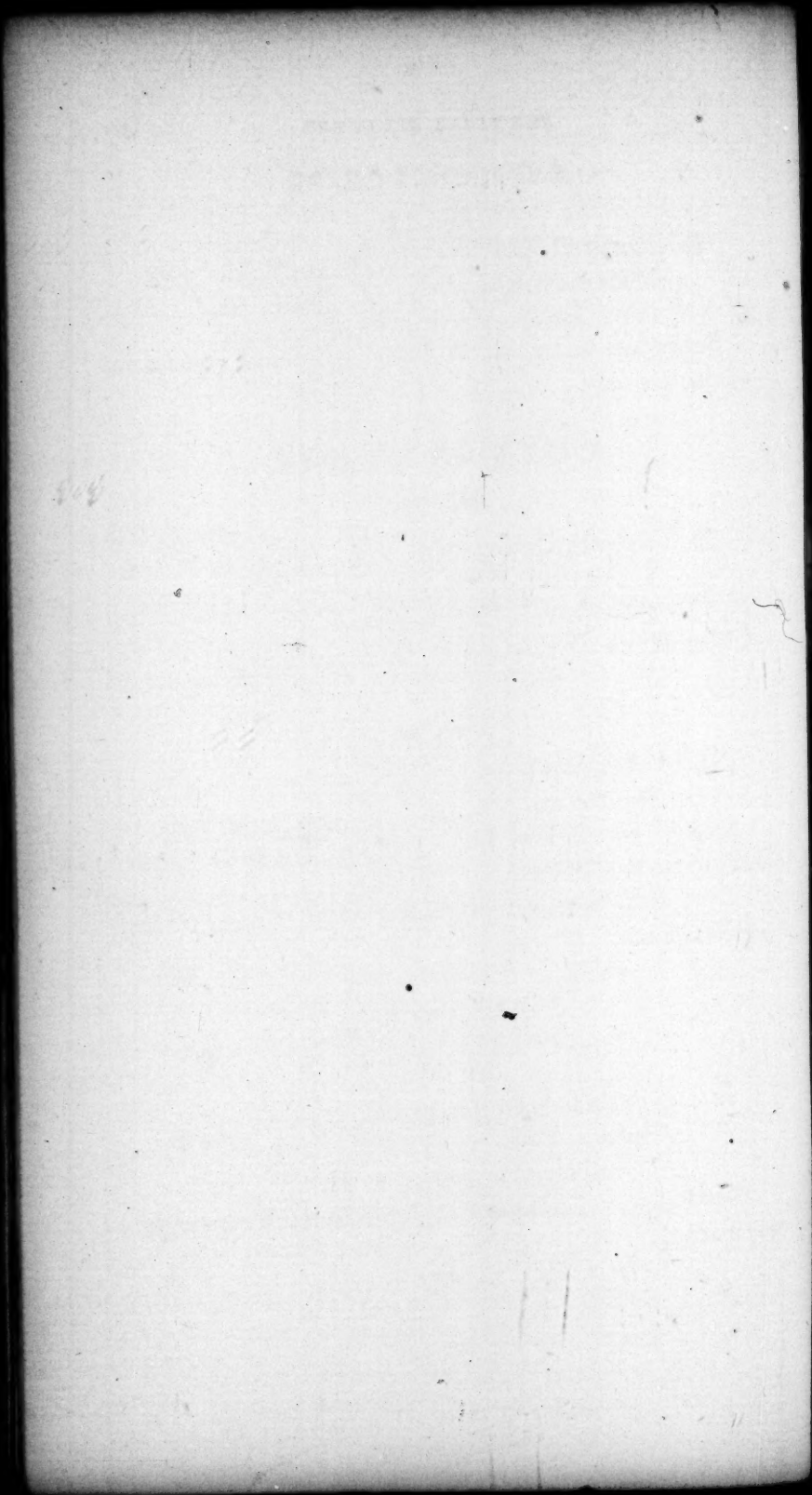
Fiat Gargarisma, quocum os et fauces sæpè de die
colluantur.

No. 72.

Rx Cinchon. in pulv. trit. dr. ii.
Lact. nov. vaccin. unc. viii. M.

Pro Enemate injiciatur, et, horis tribus interpositis, ad
tertiam vicem repetatur.





COLCHICUM.

No. 73.

R̄ Oxymell. Colchic. unc. fs.

Sal. ammoniac. dr. i.

Aq. Menth. piperit. unc. vss.

Secundum artem fiat Mistura, cujus sumat cochlearia tria ter in die.

COLOCYNTHIS.

No. 74.

R̄ Extract. Colocynthid. comp. gr. xv.

Calomelan. gr. iii.

Ol. essential. Piment. gutt. ii.

Sint Pilulæ quatuor, primo mane sumendæ.

No. 75.

R̄ Colocynthid. dr. i.

Aq. fervent. unc. x.

Coque per sextam horæ partem, et liquori colato adhuc tepido admisce,

Syr. Spin. cervin. unc. i. ut fiat Enema statim injiciendum.

COLOMBA.

No. 76.

R̄ Colomb. in pulv. trit. gr. x.

Rhabarb. Pulv.

Ferr. Rubigin. singul. gr. v. M.

Fiat Pulvis, vel Syrupus Zingiberis Bolus, bis quotidie capiendus.

CORNU CERVI.

No. 77.

Rx. Sal. Corn. Cerv. gr. x.
 Aq. Puleg. dr. xi.
 Tinct. Cardam. comp. dr. i. M.
 Sit Haustus. Sub languorem fumatur.

CUCUMIS AGRESTIS.

No. 78.

Rx Elater. gr. iii.
 Crystallor. Tartar. scrup. i.

Simul in pulverem tenuem terantur, et addatur Conservæ Aurantii Corticis quantum satis sit ut fiat Bolus, mane primo, bis in hebdomadâ, fumendus.

CUPRUM.

No. 79.

Rx Pilul. Cupr. (Ph. Ed.) dr. i.
 Divide in Pilulas viginti, quarum capiat in die duas vel tres.

No. 80.

Rx Cupr. ammoniac. (Ph. Ed.) gr. v.
 Aq. Rosæ, unc. v. Solve.
 Utatur, more solito, pro Injectione.

No. 81.

Rx Oxymell. Ærugin. unc. fs.
 Mell. Rosæ, unc. ii.
 Decoct. Hord. unc. iiiss. M.
 Utatur pro Gargarismate.

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DIGITALIS.

No. 82.

Rx Digital. Herb. exsiccat. in pulv. trit. gr. i.

CrySTALLOR. Tart. Pulv. dr. fs.

Pulv. aromatic. gr. iii. M.

Fiant Pulveres sex hujusmodi, quorum fumatur unus
bis terve de die.

No. 83.

Rx Digital. Herb. exsiccat. in pulv. trit. gr. x.

Confection. opiat. q. s. ut fiant Pilulæ decem.

Sumat unam vel alteram bis in die.

No. 84.

Rx Digital. Herb. exsiccat. dr. i.

Aq. fervent. unc. viii.

Macera per horæ sextam partem, et liquori cum ex-
pressionem colato adde,

Tinctur. Cardam. comp. unc. i.

Capiat unciam unam bis die.

DOLICHOS.

No. 85.

Rx Dolich. Pub. rigid. (Ph. Ed.) dr. i.

Syr. simpl. q. s. ut fiat Electuarium.

Capiat cochlearium mininum, singulis auroris, ad ter-
tiam usque vicem.

EUPHORBIIUM.

No. 86.

Rx Emplast. Pic. Burgund. comp. unc. ii.

Euphorb. in pulv. trit. dr. fs.

Secundum artem fiat Emplastrum, quod parti dolenti
admoveatur.

FERRUM.

No. 87.

- Rx Ferr. ammoniac. gr. v. vel
Ferr. vitriolat. gr. iii.
Pulv. Myrrh. comp. gr. xv.

Bene simul terantur, et Syrupo Zingiberis fiat Bolus,
bis in die fumendus.

No. 88.

- Rx Tinct. Ferr. muriat. unc. fs.
Spirit. Cinnam. unc. ifs. M.

Capiat cochleare parvulum unum vel alterum, bis de
die, ex Aquæ puræ tepidæ cyatho.

No. 89.

- Rx Ferr. vitriolat. in pulv. trit. gr. xii.
Extract. Gentian. dr. ii.
Ol. essential. Menth. pip. gutt. ii.

Simul contunde, et massam in Pilulas triginta divide;
quarum tres vel quatuor bis de die fumantur, ex poculo
Infusi Florum Chamæmeli.

No. 90.

- Rx Ferr. Rubigin. vel
—— tartarifat. dr. ii.
Conserv. Absinth. maritim. vel.
—— Aurant. Cortic. unc. ifs.
Syr. ejusdem. dr. ii. ut fiat Electuarium.

Capiat minutum cochleare, ex tantillo Vini rubri
Lusitanici.

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GALBANUM.

No. 91.

R̄ Pil. Galban. comp. dr. ii.

Ferr. Rubigin. scrup. iv.

Syr. Zingib. q. s. ut fiat massa pilularis.

Fingatur in Pilulas quadraginta, de quibus fumantur
quatuor bis in die, ex cyatho Aquæ Pulegii.

No. 92.

Tinct. Galban.

Dosis drachma una vel altera, ex quovis vehiculo.

GALLA.

No. 93.

R̄ Gall. in pulv. trit. dr. i.

Adip. suill. præp. unc. i.

Tere simul ut fiat Unguentum, quo partes affectæ nocte
manequæ illinantur.

GAMBOGIA.

No. 94.

R̄ Gambog. in pulv. trit. gr. v.

CrySTALLOR. Tart. Pulv. scrup. i.

Conf. Aurant. Cort. q. s.

Fiat Bolus, diluculo fumendus.

GENTIANA.

No. 95.

R̄ Infus. Gentian. comp. dr. x.

Kali præp. gr. x.

Spirit. Piment. dr. ii. M. ut fiat Haustus.

Sumatur talis, vacuo stomacho, mane, iterumque hora
ante prandium.

GRANATUM.

No. 96.

R Balauft. vel
 Tormentill. contuf. dr. i.
 Rhabarb. incif.
 Zingiber. incif. fingul. dr. fs.
 Aq. fervent. unc. xii.

Mâcera per horæ spatium, et cola. Dofis uncia una
 cum femiffe bis de die.

GUAIA CUM.

No. 97.

R Guaiac. Gum-refin. in pulv. trit.
 Mithridat. utriufq. gr. xv.

Terantur fimul, et Syrupo aliquo fiat Bolus, omni nocte
 capiendus.

No. 98.

Tinct. Guaiac. ammoniat.

Dofis a drachma una ad unciam dimidiam ufque bis
 indies ex Decocto Hordei.

HÆMATOKYLUM

No. 99.

R Hæmatoxyl. raf. unc. i.
 Aq. diffillat. lib. ifs.

Decoque ad libram unam, et cola. Liqueur colati
 unciis feptem addatur,

Tinct. Cinnamon. unc. i. ut fiat Miftura aftringens;
 cujus capiat cochlearia tria poft fingulas fedes liquidas.

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No. 100.

R Extract. Hæmatoxyl. gr. x.

Pulv. Rad. Rhabarb. gr. v.

Confect. opiat. gr. xv.

Simul terantur, ut fiat Bolus, bis de die capiendus.

HELLEBORUS ALBUS.

No. 101.

R. Unguent Helleb. alb.

—— Sulphur. singul. unc. fs.

Misce ut fiat Unguentum pforicum. Utatur singulis noctibus per hebdomadam, more solito.

HELLEBORUS NIGER.

No. 102.

Tinctur. Hellebor. nigr.

Dosis a guttis viginti ad sexaginta usque, bis in die.

No. 103.

R Extract. Hellebor. nigr. scrup. i.

Ol. essential. Menth. piperit. gutt. i.

Sint Pilulæ numero quatuor. Capiatur una, nocte maneque.

HYDRARGYRUS.

No. 104.

Pilul. Hydrargyr.

Dosis a granis decem ad scrupulum unum vel drachmam dimidiam usque.

No. 105.

R̄ Pilul. Hydrargyr.

Succ. Cicut. spissat. singul. dr. i.

Simul contunde, et massam divide in Pilulas quatuor et viginti; quarum dentur duæ mane nocteque.

No. 106.

R̄ Pilul. Hydrargyr. gr. x.

Conserv. Scill. scrup. i.

Contunde simul, ut pro Bolo hora somni detur.

No. 107.

R̄ Unguent. Hydrarg. fort. unc. fs.

Camphor. scrup. i.

Ol. Oliv. gutt. xx.

Camphoræ terendo in oleo solutæ immisce Unguentum. Divide in partes quatuor æquales, una quarum leniter inungatur locus adfectus omni nocte.

No. 108.

R̄ Hydrargyr. calcinat. in pulv. ten. trit. gr. x.

Confect. opiat. dr. i.

Pulv. Radic. Glycyrrh. q. s. ut fiat massa in Pilulas viginti fingenda. Detur una mane et vespere, ac superbibat æger Decocti Sarsaparillæ compositi libram dimidiam.

No. 109.

R̄ Hydrargyr. muriat. gr. iv.

Sal. ammoniac. gr. viii.

Spir. vinos. tenuior. unc. ii.

Solve, et solutionis detur cochleare minimum bis de die ex Decocti Hordei cyatho.

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No. 110.

- R Hydrargyr. muriat. gr. ii.
 Sal. ammoniac. gr. i.
 Aq. Rosæ, unc. viii. solve.

Liquoris hujus tepefacti pauxillum, ope siphunculi eburni, in virgam bis terve indies injiciatur.

No. 111.

- R Calomelan. scrup. i.
 Sulph. Antimon. præcipit. dr. fs.
 Guaiac. Pulv. dr. i.
 Balf. Copaiv. quant. sat. sit ut fiant Pilulæ triginta, quarum sumantur tres vel quatuor singulis noctibus.

No. 112.

- R Hydrargyr. muriat. mit. gr. x.
 Opii. purificat. gr. v.
 Conserv. Aurant. Cortic. q. s. ad mass. pilul. fingend.
 Sint Pilulæ decem, quarum detur una omni nocte.

No. 113.

- R Unguent. Hydrargyr. nitrat. unc. fs.
 ——— Adip. suill. unc. i.
 Conterantur ut fiat Unguentum, quo partes affectæ subindè inungantur.

No. 114.

- R Hydrarg. vitriolat. gr. vii.
 Conserv. Aurant. Cortic. q. s. ut fiat Bolus emeticus, vesperi fumendus.

IPECACUANHA.

No. 115.

R̄ Ipecac. in pulv. trit. gr. xv.

Antimon. tartarifat. gr. i. M. ut fiat Pulvis
emeticus.Ex pauxillo liquoris alicujus idonei vespere hauriatur,
et, vomitu moto, superbibantur cyathi aliquot Infusi tepidi
Florum Chamæmeli.

No. 116.

R̄ Ipecac. in pulv. trit. gr. ii.

Rhabarb. pulv.

Pulv. Cret. composit. cum Opio, sing. gr. x.

Syr. Aurant. Cortic. quant. suff.

Sit Bolus, omni nocte sumendus, dum æger dejectioni-
bus laborat.

No. 117.

Vin. Ipecac.

Dosis ad vomitum ciendum, ab uncia dimidia usque
ad fescunciam.

JALAPIUM.

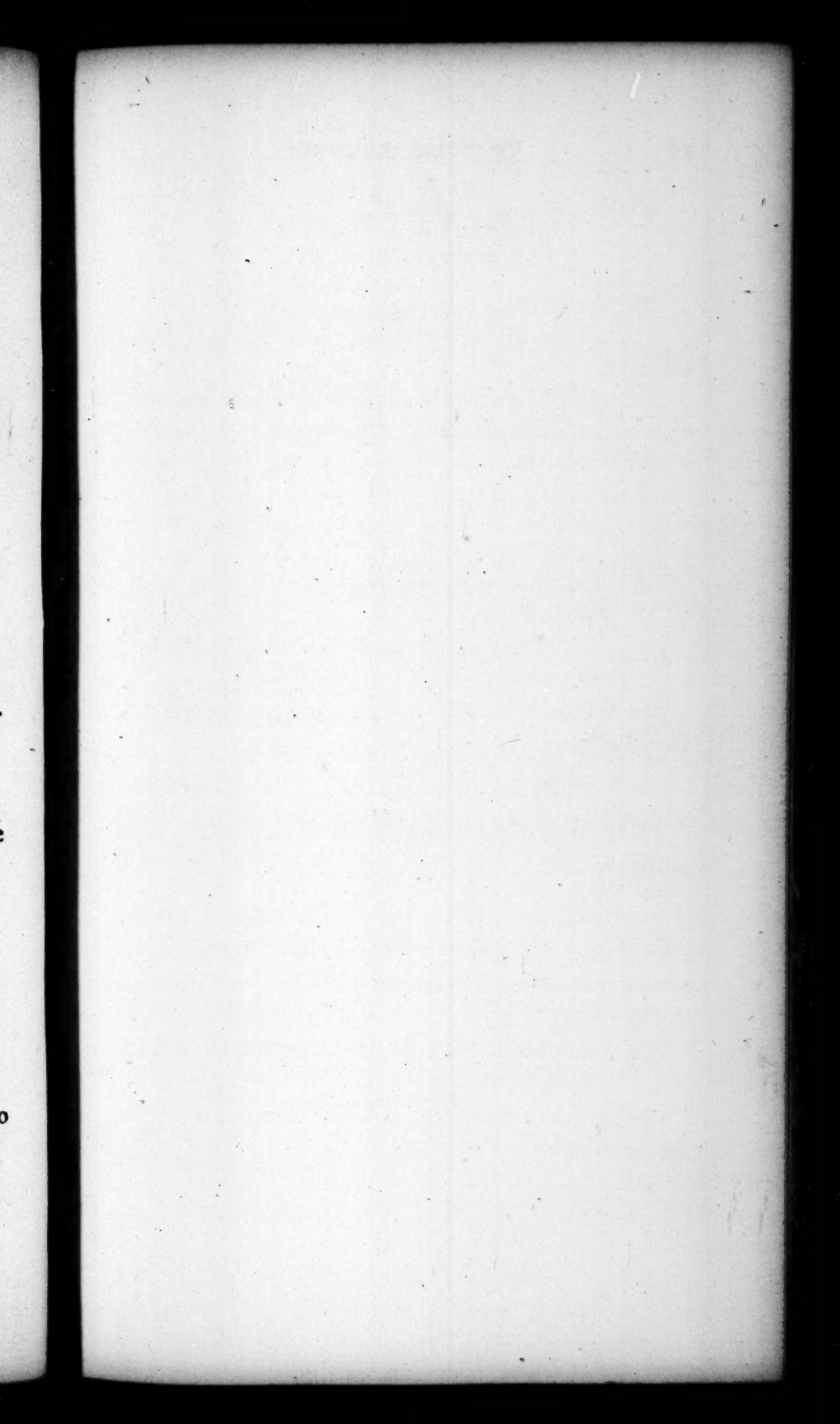
No. 118.

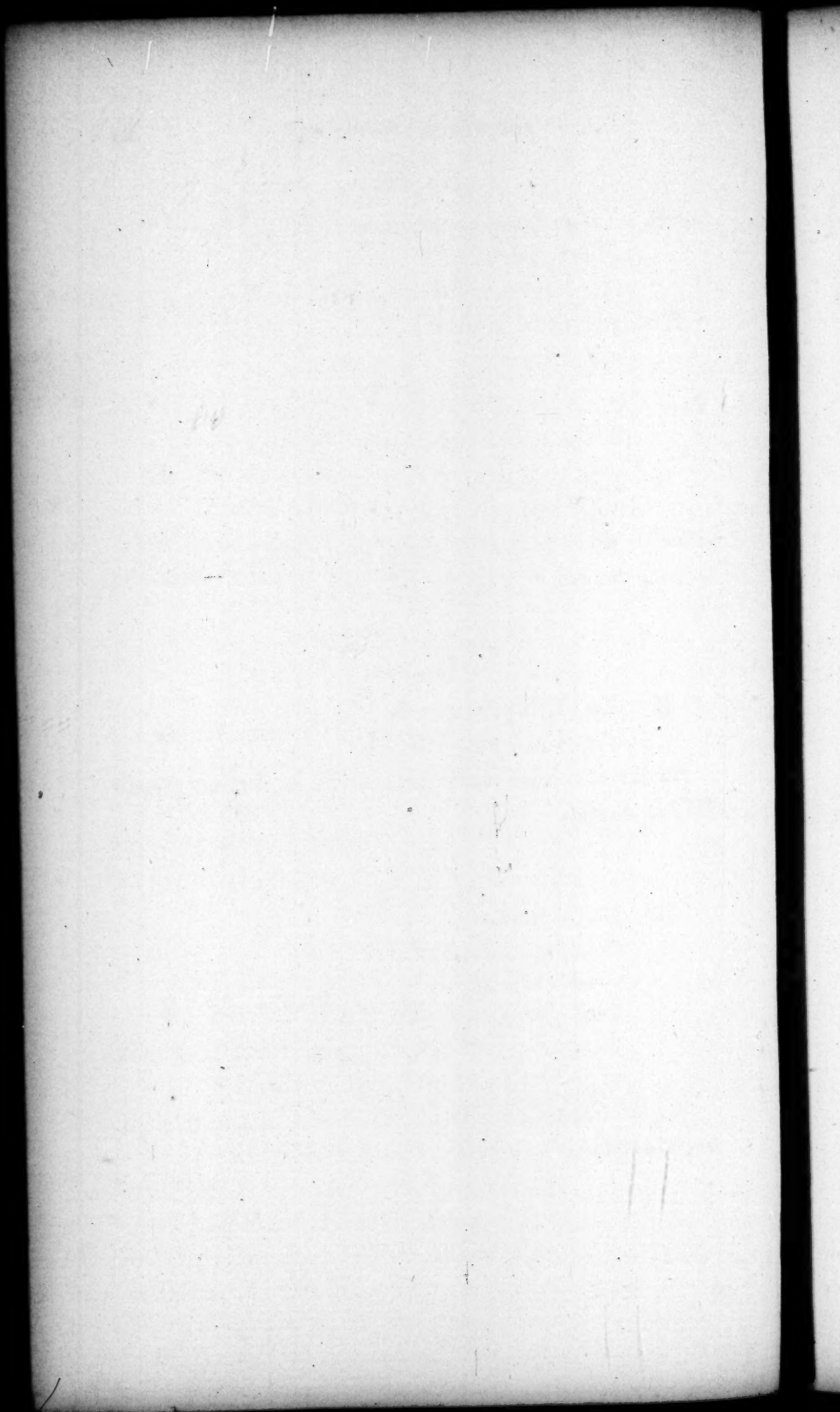
R̄ Jalapii,

Crystallor. Tart. singul. in pulv. tritor. dr. fs.

Pulv. aromat. gr. v. M.

Sit Pulvis catharticus, mane ex fero lactis a jejuno
excipiendus.





No. 119.

R Infus. Senn. tartarifat. unc. ii.
 Tinct. Jalap.
 Syr. Spin. cervin. singul. dr. ii. M.
 Hauriatur mane pro dosi.

K A L I.

No. 120.

R Kali acetat. dr. ii.
 Aq. Menth. piperit. unc. iſs.
 Spir. Lavendul. comp. gutt. xxx.
 Fiat Haustus, ter in die capiendus.

No. 121.

R Aq. Kali pur. unc. ſs.
 Aq. Calc. unc. viſs. M.
 Sumat cochleare unum plenum bis in die, ex poculo
 Iusculi bovini.

No. 122.

R Kali tartarifat.
 Natr. tartarifat.
 — vitriolat.
 Sod. phosphorat. (Ph. Ed.)
 Magnes. vitriolat. horum cujus volueris, unc. ii.
 Aq. Menth. piperit. unc. vi. Solve.
 Capiat cochlearia tria alternis horis, donec rite sol-
 vatur alvus.

No. 123.

R Kali vitriolat.

Rhabarb. singul. in pulv. trit. gr. xv.

Pulver. aromatic. gr. v.

Conterantur, ut fiat Pulvis purgans. Detur manè.

No. 124.

K I N O.

R Kino in pulv. trit. gr. v.

Pulv. Cret. comp. cum Opio, gr. xv. M.

Fiat Pulvis, vel, syrupum zingiberis addendo, Bolus, ad alvum contrahendum mane fumendus.

MAGNESIA.

No. 125.

R Magnes. ustæ, scrup. i.

Rhabarb. in pulv. trit. gr. x. M.

Sit Pulvis, ex Aqua Menthæ piperitidis mane fumendus, et, urgente cardialgia, pro re nata repetendus.

MANNA.

No. 126.

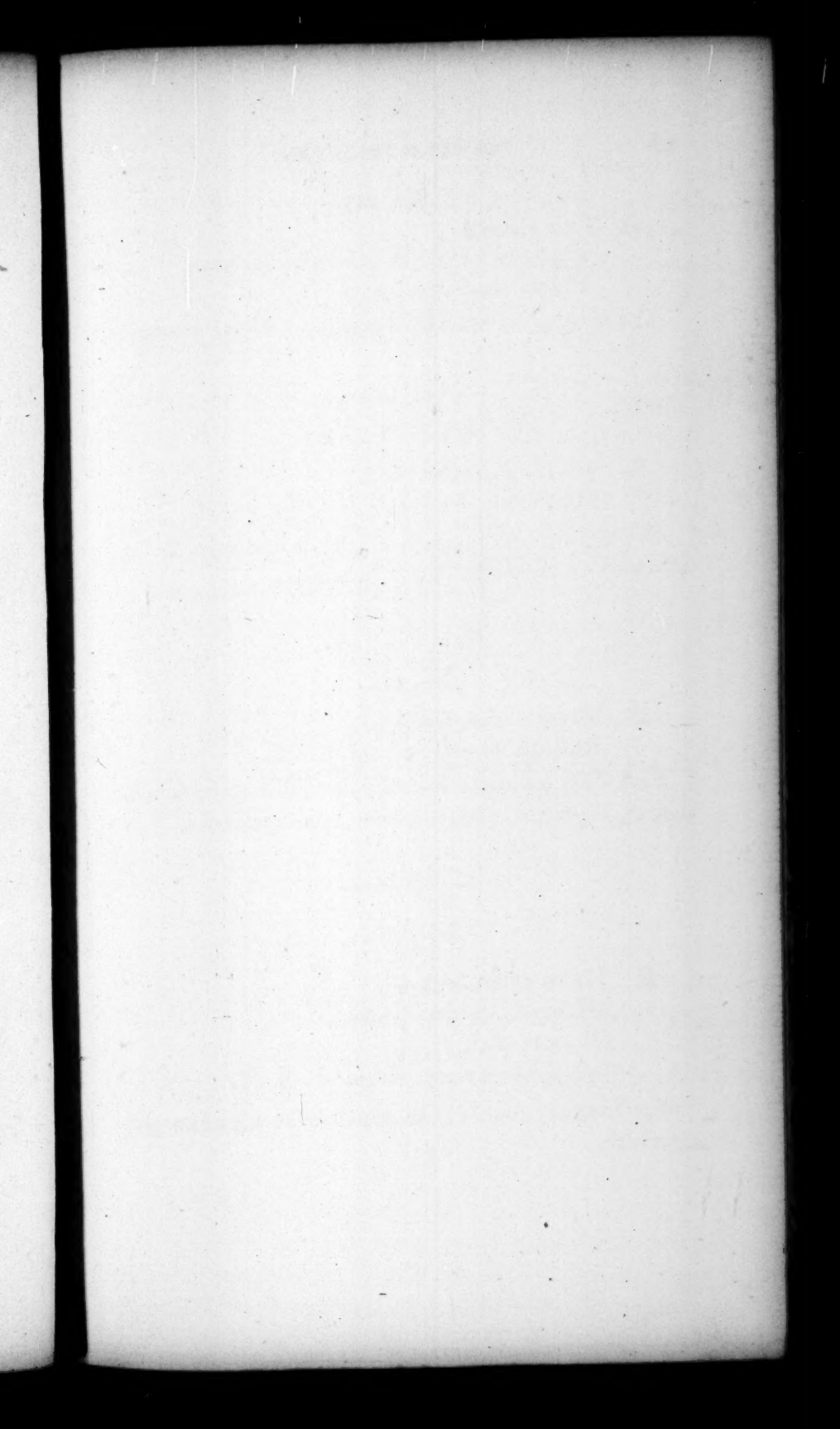
R Mann. optim. unc. i.

Mucilagin. Arabic. Gum.

Ol. Amygdal.

Syr. Limon. Succ. singul. dr. ii. M.

Fiat Linctus, cujus capiat minutum cochlearium pro necessitate.



No. 127.

R $\bar{c}$ Mann. optim.
Ol. Amygdal. utriusq. unc. i.
Kali præp. gr. xii.
Aq. Cinnamom.
— Font. utriusq. unc. iii.

Manna Oleo et Kali ritè terendo subactis, admisce paulatim Aquas ut fiat Emulsio, cujus fumantur unciaë duæ bis quotidie.

No. 128.

R $\bar{c}$ Mann. optim. unc. ii.
Fruet. Tamarindor. unc. i.
Seri Lact. unc. viii.

Coque Tamarindos ex fero per sextam horæ partem et cola; dein adde Mannam ut fiat Mistura, cujus capiat vasculum secunda quaque hora, donec responderit alvus.

MEZEREUM.

No. 129.

R $\bar{c}$ Mezer. Radic. Cortic. dr. ii.
Aq. Font. libr. ii.
Decoque ad libram unam. Sub finem coctionis adde,
Glycyrrhiz. Radic. incis. unc. i. et cola.
Bibat æger ab unciiis duabus usque ad uncias quatuor,
ter quaterve indies.

MOSCHUS.

No. 130.

- Rx Mosch.
Castor. Ruffic. utriusq. in pulv. trit. scrup. i.
Conserv. Cynosbat. dr. i.

Fiant Boli numero duo, quorum alter mane, alter
vesperi fumatur, ex Misturæ camphoratæ unciis duabus.

No. 131.

Mistur. moschat.

Dosis cochlearia tria, sexta quaque hora.

MYRRHA.

No. 132.

- Rx Myrrh. in pulv. trit. dr. i.
Kali præp. dr. ss.
Ferr. vitriolat. gr. xii.
Mucil. Arabic. Gum. dr. ii.
Decoct. Glycyrrh. Radic. recent. unc. viis.
Spir. Piment. unc. i.

Tere Myrrham et Ferrum vitriolatum cum Kali et
Mucilagine, donec perfecte commisceantur, dein adde
reliqua. Dosis uncia una, bis terve de die.

No. 133.

- Rx. Myrrh. in pulv. trit. scrup. ii.
Ferr. vitriolat. gr. xii.

Bene conterantur, et gradatim adde,

Aq. Kali præp. gutt. xxv. ut fiat massa in Pilulas
duodecim æquales dividenda: harum fumantur duæ, ter
quotidie.

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No. 134.

Rx Myrrh. in pulv. trit. scrup. viii.
 Conserv. Rosæ rubr. unc. i.
 Acid. vitriolic. dilut. dr. ii.
 Syr. Aurant. Cortic. quant. sat. fit ut fiat Electu-
 arium molle; cujus ter indies detur, quod nuclei fructus
 myristicæ magnitudinem habeat.

NATRON.

No. 135.

Rx Natr. præp. in leni igne calcinat. dr. iſs.
 Rhabarb. in pulv. trit. dr. ſs.
 Conserv. Rosæ rubr. q. s.

Fiant Pilulæ mediocres, quarum fumantur tres bis
 terve indies ex cyatho Aquæ, vulgò mephiticæ alkalinæ
 dictæ.

NICOTIANA.

No. 136.

Rx Nicotian. Virginian. dr. i.
 Aq. fervent. unc. iv.

Macera per semihoram, et infusi cum expressione
 colati unciis tribus adde,

Spir. Piment. unc. i.

Dosis a guttis triginta, usque ad sexaginta, bis terve
 indies.

Infuso, omisso Spiritu Pimento, uti liceat pro enemate.

NITRUM.

No. 137.

R Nitr. purificat. gr. x.
Pulver. Tragacanth. compos. scrup. i.
Conterantur, ut fiat Pulvis, ter quotidie fumendus.

No. 138.

R Nitr. purificat. dr. i.
Lact. Amygdal. unc. viii.
Solve conterendo, ut fiat Mistura. Sumantur cochlearia
tria, singulis quadrihoriis.

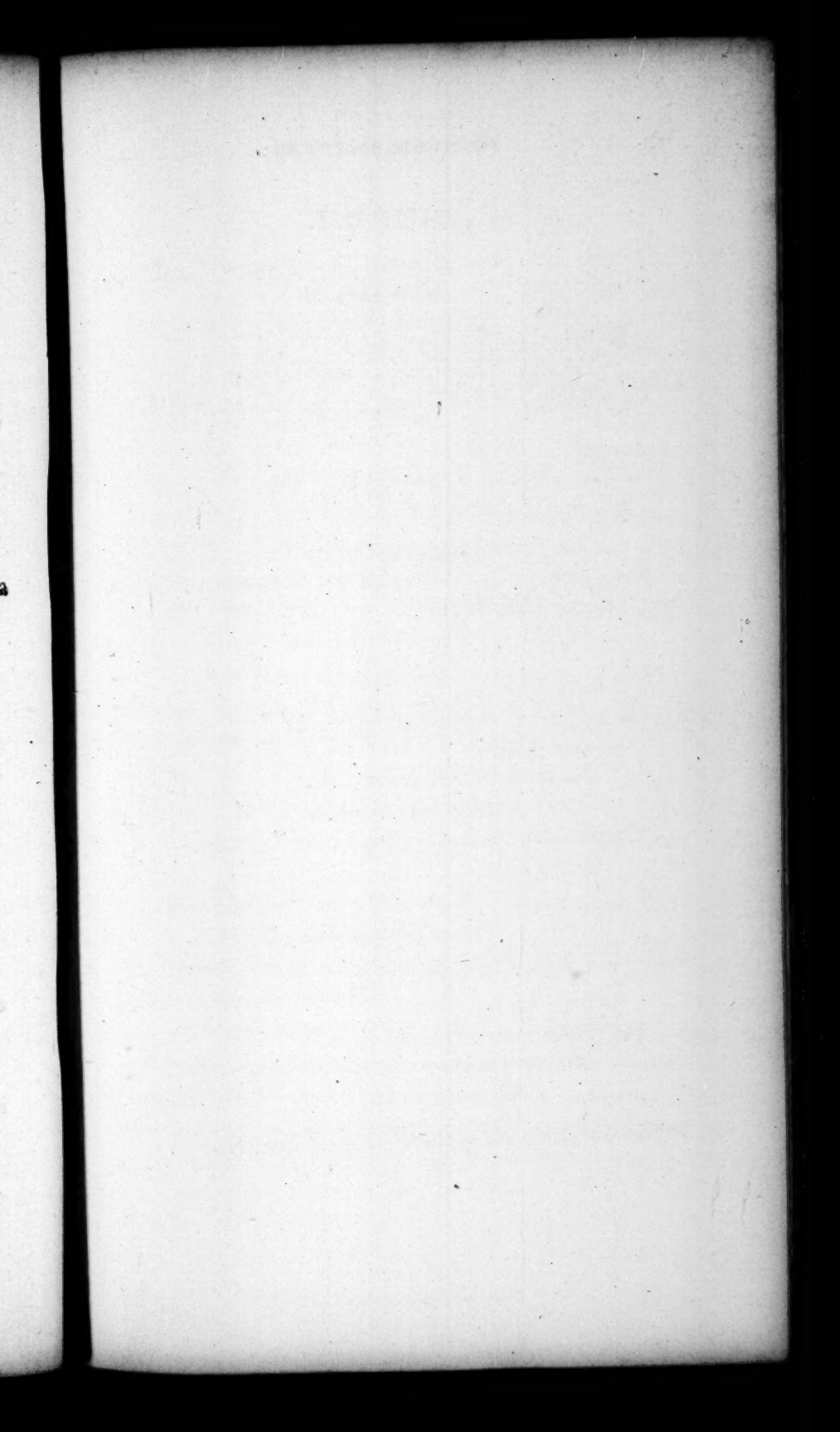
No. 139.

R Nitr. purificat. in pulv. trit. gr. x.
Aq. distillat.
Mell. acetat. utriusq. dr. v.
Tinct. Cardamom. comp. dr. i. M.
Sit pro Haustu, sexta quaque hora fumendo.

OLIBANUM.

No. 140.

R Oliban. in pulv. trit. dr. fs.
Decoct. Cinchon. dr. xii.
Syr. tolutan. dr. i. M.
Sit Haustus, ter quaterve in die capiendus.



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OPIUM.

No. 141.

- Rx Tinct. Opii gutt. xx.
Aq. Cinnam. unc. i.
Syr. Papav. errat. dr. fs. M.

Sit Haustus, noctu dormituro dandus.

No. 142.

- Rx Opii purif. gr. i.
Calomelan. gr. iiii.
Cons. Aurant. Cort. q. s. ut fiat

Pilula, hora somni fumenda.

No. 143.

- Rx Confect. opiat. dr. i.
—— aromat. dr. ii.
Aq. Menth. fativ. unc. vii.
Spirit. Lavend. comp. unc. fs. M.

Phiala concussa, dentur cochlearia tria ampla, ter quaterve indies.

No. 144.

- Rx Tinct. Opii, dr. i.
Mucil. arabic. Gum. unc. fs.
Lact. vaccin. nov. unc. iiii. M. ut fiat Enema

statim injiciendum.

No. 145.

- Rx Opii purif. scrup. i.
Empl. Litharg. unc. i.

Secund. art. misce ut fiat Emplastrum.

Super alutam inductum, parti dolenti admoveatur.

PAPAV. ALBUS.

No. 146.

- R Syr. Papav. alb.
Conserv. Cynosbat.
Ol. Amygdal. utriusq. unc. i.
Acid. vitriolic. dilut. dr. i. M.

Sit Linctus; cujus cochleare minimum sæpius in die paulatim delingatur.

No. 147.

- R Extract. Papav. alb. gr. iii.
Pulver. antimonial. gr. ii.
Fiat Pilula, nocte capienda.

No. 148.

- R Papav. alb. exsiccat. unc. ii.
Aq. fervent. libr. ifs.

Coque ad mollitiam, exprime et cola. Liquori colato adde Farinæ Lini quantum satis sit, ut fiat Cataplasma; vel, omissa Farina, pro fomento adhibeatur.

PAREIRA BRAVA.

No. 149.

- R Pareir. brav. incis.
Glycyrrh. Radic. incis. utriusq. unc. i.
Aq. fervent. libr. iii.
Decoque ad libram unam et cola.
Hauriatur cyathum amplum, quarta quaque hora.

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PIX LIQUIDA.

No. 150.

R Pic. liquid. unc. iv.

Calcis, unc. vi.

Aq. fervent, libr. iii.

Decoque ad dimidiam, et, post subsidentiam, liquorem
supernatantem cola. Sit pro Lotione capiti.

PLUMBUM.

No. 151.

R Cerufs. acetat. in pulv. trit. gr. xviii.

Pulver. Tragacanth. comp. dr. ii.

Conterantur, et in portiones sex pares dividantur.

Detur una, hora sexta matutina, et nona vespertina, ex
Seri Lactis cyatho.

No. 152.

R Aq. Litharg. acetat.

Tinct. Opii, singul. dr. i.

Aq. Rosæ, unc. viii. M.

Sit Lotio, tepida adhibenda.

QUASSIA.

No. 153.

R Quafs. ras. dr. fs.

Aurant. Hispal. Cort. dr. i.

Aq. fervent. lib. i.

Stent, in vase operto, per horæ spatium et cola.

Infusi colati fumantur cochlearia tria vel quatuor, bis
quotidie.

RAPHANUS RUSTICANUS.

VIDE SINAPI.

RHABARBARUM.

No. 154.

R Rhabarb. in pulv. trit.
 Magnes. ust. utriusq. dr. ii.
 Cinnamon. Cortic. contus. dr. i.
 Aq. fervent. unc. x.

Magnesia et Rhabarbaro prius ritè contritis, in vase idoneo macera et liquorem cola; dein adde,

Tinct. Aurant. Cortic. unc. i.

Sumantur cochlearia tria, hora ante prandium, quotidie.

No. 155.

R Rhabarb. Pulv. gr. viii.
 Colomb. Pulv. gr. x.
 Pulver. aromatic. gr. iii. M.

Sit Pulvis, vel, Syrupo Aurantii Corticis addito, Bolus, mane nocteque fumendus, ex poculo Aquæ Selteranæ.

No. 156.

R Rhabarb. in pulver. trit. dr. fs.
 Sapon, dr. i.

Syr. Zingiber. q. f. ut fiat massa pilularis. Dividatur in Pilulas viginti; quarum fumantur tres vel quatuor, bis de die.

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No. 157.

R Rhabarb. in pulv. trit. gr. xv.

Ipecac. Pulv. gr. ii.

Conf. opiat. scrup. i.

Fiat Bolus, singulis noctibus fumendus.

No. 158.

R Tinct. Rhabarb.

— Aurant. Cort. singul. unc. i.

Vin. Ferri, unc. ii. M.

Capiat cochleare unum amplum bis quotidie.

R I C I N U S.

No. 159.

R Ol. e Semin. Ricin.

Vitell. Ovi. recent. singul. unc. fs.

His rite terendo subactis, adde paulatim,

Aq. Cinnam. vel

Menth. Piperit. unc. ifs. ut fiat Haustus quam-
primum fumendus.

R O S A R U B R A.

No. 160.

R Conf. Rosæ rub. unc. ii.

Acid. vitriol. dilut. dr. ii.

Conterantur ut fiat Electuarium; cujus cochleare
minimum unum detur ter indies.

S A B I N A.

No. 161.

R Sabin. exsicc. in pulv. trit.

Ærug. præp. singul. unc. fs.

Misce ut fiat Pulvis escharoticus.

SAGAPENUM.

No. 162.

Rx Lact. Sagapen. dr. x.
 Spir. Ammon. comp.
 — Lavend. comp. ana gutt. xxx. M.
 Sit Haustus, ter quotidie sumendus.

SAL AMMONIACUS.

Vide AMMONIA.

SANGUIS DRACONIS.

No. 163.

Rx Sang. Dracon. in pulv. trit. gr. x.
 Pulv. Cretæ comp. cum Opio, scrup. i.
 Syr. Zingib. q. s. ut fiat Bolus.
 Sumatur ter indies ex Decocto Cornu Cervi.

S A P O.

No. 164.

Rx Sapon. dr. ii.
 Ol. essent. Caryoph. arom. gutt. ii.
 Fiant Pilulæ viginti, quarum sumantur quatuor bis in
 die.

No. 165.

Rx Linim. Sapon. unc. ifs.
 Tinct. Canth. unc. fs. M.
 Sit Linimentum, quo partes adfectæ perfricandæ sunt.

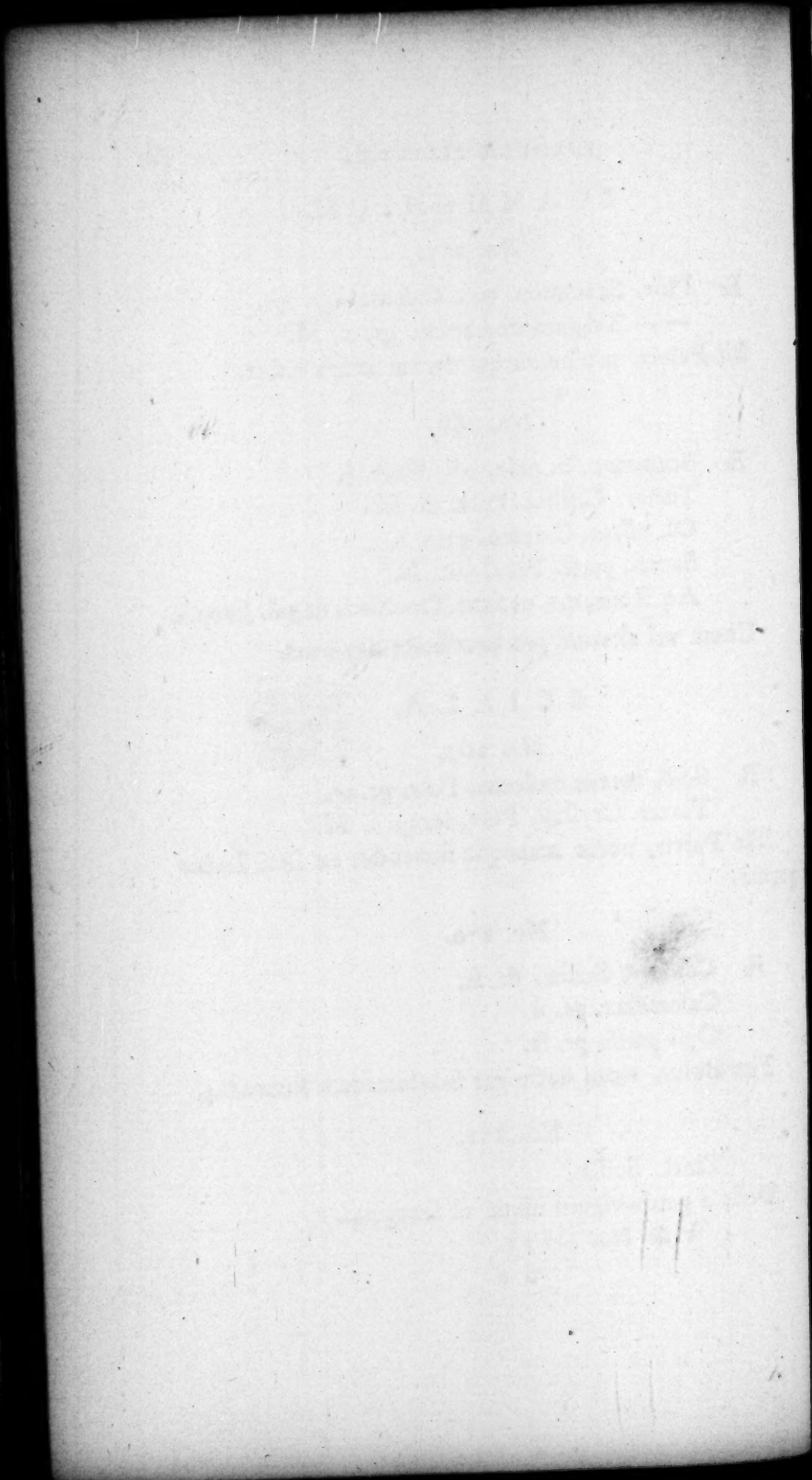
No. 166.

Rx Sapon. dr. ifs.
 Seri Lact. recent. unc. ii.
 Mellis, dr. ii.
 Conterantur ut fiat Clyisma intestinale, pro infanti.

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MISS MARY C. COLLIER



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SCAMMONIUM.

No. 167.

R Pulv. Scammon. cum Calomel. gr. xii.
 — Tragacanth. comp. gr. x. M.
 Sit Pulvis, pro puero qui decem annos habet.

No. 168.

R Scammon. in pulv. trit. scrup. i.
 Tartar. Crystal. Pulv. dr. fs.
 Ol. essent. Cinnam. gutt. i.
 Sacch. purif. Pulv. unc. fs.
 Aq. Rosæ, q. s. ut fiant Trochisci, singul. scrup. i.
 Unum vel alterum pro necessitate deglutiat.

SCILLA.

No. 169.

R Scill. recens exsiccat. Pulv. gr. iv.
 Tartar. Crystall. Pulv. scrup. i. M.
 Sit Pulvis, nocte maneque sumendus ex Seri Lactis
 poculo.

No. 170.

R Conserv. Scillæ, dr. fs.
 Calomelan. gr. ii.
 Opii purif. gr. fs.
 Fiat Bolus, omni nocte per hebdomadam sumendus.

No. 171.

Tinct. Scillæ.
 Dosis a guttis viginti usque ad sexaginta.
 Vide No. 22. 23.

S E N E K A.

No. 172.

R $\bar{x}$ Senek. Rad. contus. unc. i.

Aq. fervent. lib. i.

Decoque ad dimidiam et cola ; dein adde,

Spir. Piment. unc. i. et

Syr. simpl. unc. fs.

Dentur cochlearia tria ter quotidie.

S E N N A.

No. 173.

R $\bar{x}$ Infus. Sennæ simpl. unc. v.~~Kali~~ tartar. unc. i.

Antim. tartar. Pulv. gr. ii.

Solve ut fiat Mist. cathart.

Sumantur cochlearia quatuor, quolibet trihorio, donec
venter rite solutus fuerit.

No. 174.

R $\bar{x}$ Infus. Tamarind. cum Senna, (Ph. Ed.) unc. iiss.

Tinct. Sennæ, unc. fs M. ut fiat

Haustus purgans pro dosi.

No. 175.

Elect. Sennæ.

Dosis cochleare minimum unum vel alterum pro re nata.

No. 176.

Tinct. Sennæ.

Dosis ab uncia dimidia ad uncias duas usque.

onec

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nata.

SERPENTARIA.

No. 177.

- Rx Serpent. Virgin. contus.
Contrayerv. contus. ana dr. iiii.
Aq. fervent. unc. xiv. Macera et liquorem cola,
cui adde,
Tinct. Serpent. unc. i. et
Syr. Simpl. unc. fs.
Dentur cochlearia tria, sexta quaque hora.
Vide No. 66.

SIMAROUBA.

No. 178.

- Rx Simaroub. contus. dr. ii.
Aq. distill. lib. ii.
Decoque ad dimidiam et cola; tum adde,
Tinct. Cinnam. unc. i. ut fiat Mist. astringens.
Capiat cochlearia quatuor ter indies.

SINAPI.

No. 179.

- Rx Sinap. Semin. contus.
Raphan. rust. incis. ana dr. vi.
Aq. fervent. lib. i,
Macera in vase operto et liquorem cola, cui addantur,
Spir. Pimento, unc. ii.
Sumantur unciz duæ bis terve indies.

No. 180.

- Rx Cataplas. Sinap. quant. sat. fit.
Admoveatur plantis pedum, donec rubeant.

SPERMA CETI.

No. 181.

℞ Sperm. Ceti, dr. iii.

Vitell. Ovi unius.

Bene terantur simul; tum paulatim addantur,

Aq. Cinnam.

— distill. singul. unc. iii.

Syr. toltutan. unc. fs, ut fiat

Emulsio, cujus cochlearia quatuor ter quaterve indies
adhibeantur.

SPIGELIA.

No. 182.

℞ Spigel. Radic. unc. fs.

Aq. fervent. lib. i.

Macera et liquori colato adde,

Tinct. Rhabarb. unc. ii.

Hauriantur cochlearia quatuor, bis quotidie.

SPONGIA.

No. 183.

℞ Spong. ust. scrup. i.

Rhabarb. in pulv. trit. gr. v.

Tere simul ut fiat Pulvis, vel Syrupum Zingiberis ad-
dendo fit Bolus, bis de die fumendus.

STANNUM.

No. 184.

℞ Stann. Pulv. dr. i.

Calomelan. gr. i. M. ut fiat Pulvis.

Exceptus Melle bis quotidie fumatur.

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SUCCINUM.

No. 185.

- Rx Spir. Ammon. succin. gutt. xx.
Mist. camph. dr. x.
Spir. Lavend. comp. gutt. xxx. M.
Sit Haustus, pro re nata adhibendus.

No. 186.

- Rx Sal. Succin. purif. gr. v.
Castor. Rufs. in pulv. trit.
Asæ foetid. singul. gr. x.
Syr. simpl. q. s. ut fiat Bolus.
Nebula obvolutus detur, ter indies.

SULPHUR.

No. 187.

- Rx Sulph. Flor. dr. i.
Kali vitriolat. in pulv. trit. dr. ii.
Elect. Sennæ, unc. i.
Syr. simpl. q. s. ut fiat Electuarium molle, de
quo, singulis noctibus, minutum cochleare sumat.

TARTARUM.

No. 188.

- Rx Tartar. Crystal. in pulv. trit.
Conf. Cynosb. ana, unc. i.
Syr. Succ. Limon. q. s. ad Electuarium molle
figendum, quod sumatur, partitis portionibus, quotidie
ex Sero Lactis recentis.

TEREBINTHINA.

No. 189.

R Rhabarb. in pulv. trit. dr. i.
Terebinth. Chiæ, quant. sat. sit ad Pilulas medi-
ocres fingendas, quarum capiantur quatuor mane et
vesperi.

No. 190.

R Ol. Terebinth. rect. gutt. xx.
Farin. Tritici,
Mell. despum. singul. scrup. i.
Conterantur ut fiat Bolus, bis quotidie sumendus, ex
Decocto Hordei.

No. 191.

R Terebinth. vulg. unc. fs.
Vitell. Ovi unius,
Decoct. pro Enemat. unc. viii.
Commisceantur secundum artem ut fiat Enema.

ULMUS.

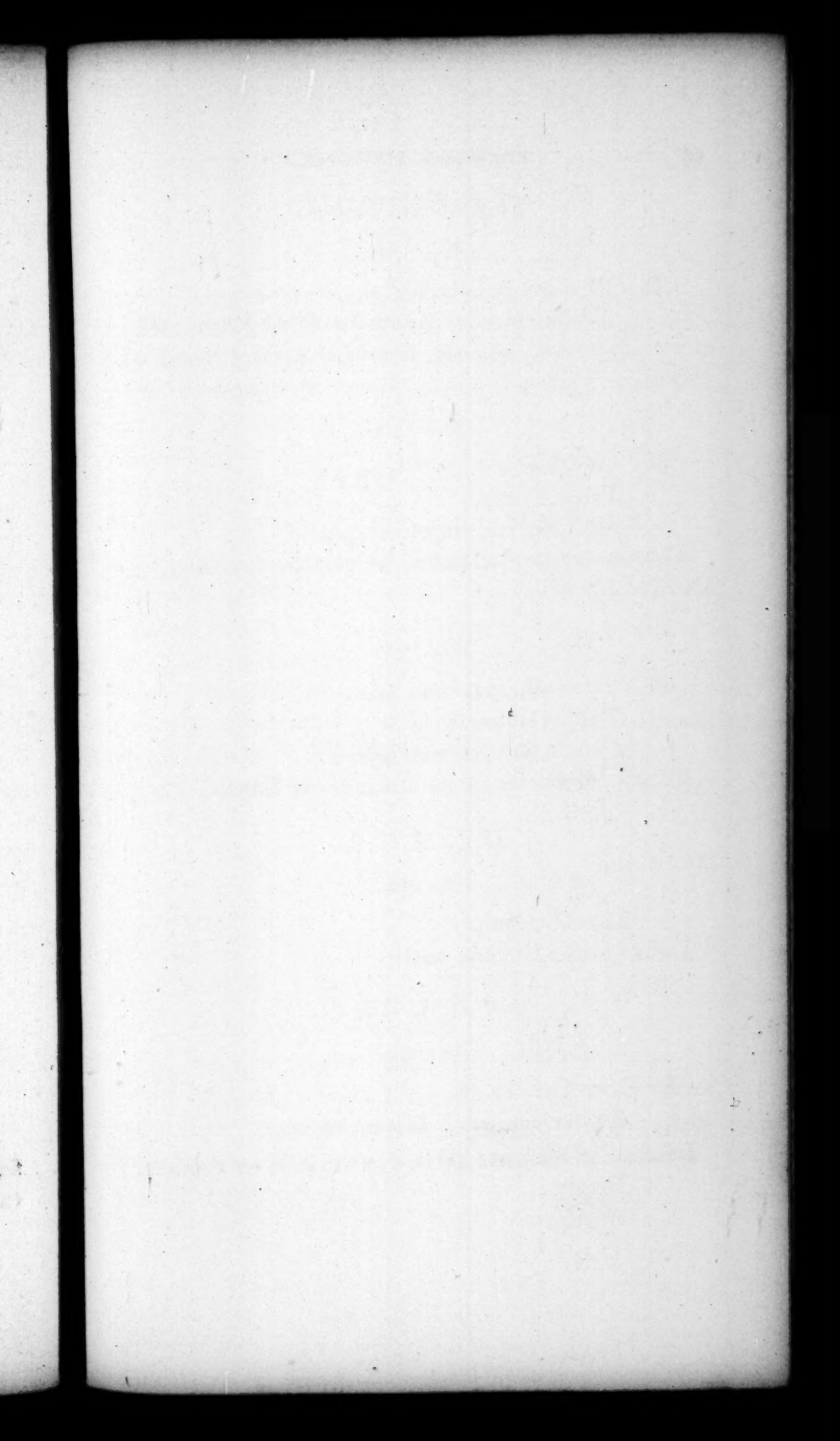
No. 192.

Decoct. Ulmi.
Dosis cyathus bis terve indies.

UVA URSI.

No. 193.

R Uvæ Ursi, dr. iii.
Aq. fervent. lib. i. Macera et cola.
Infusi colati sumantur uncia duæ vel tres, ter quotidie.



VALERIANA.

No. 194.

Rx Valerian. sylvest. in pulv. trit. unc. i.

Syr. Aurant. Cort. q. f. ut fiat

Electuarium, cujus detur cochlearium minimum unum
vel alterum, ter indies, ex aliquot uncis Aquæ Pulegii.

No. 195.

Tinct. Valerian. ammon.

Dosis a drachma una ad unciam dimidiam ter quodidie, ex quovis vehiculo idoneo.

ZINCUM.

No. 196.

Rx Zinc. calcinat. gr. viii.

Cons. Rosæ rub. q. s.

Fiat Bolus, bis in die sumendus.

No. 197.

Rx Zinc. vitriol. scrup. i.

Aq. tepid. unc. iv. Solve ut sit Haustus emeticus, pro adulto.

No. 198.

Rx Zinc. vitriol. scrup. i.

Cons. Rosæ rub. q. s. ad Pilulas viginti fingendas.

Sumatur una vel altera bis indies.

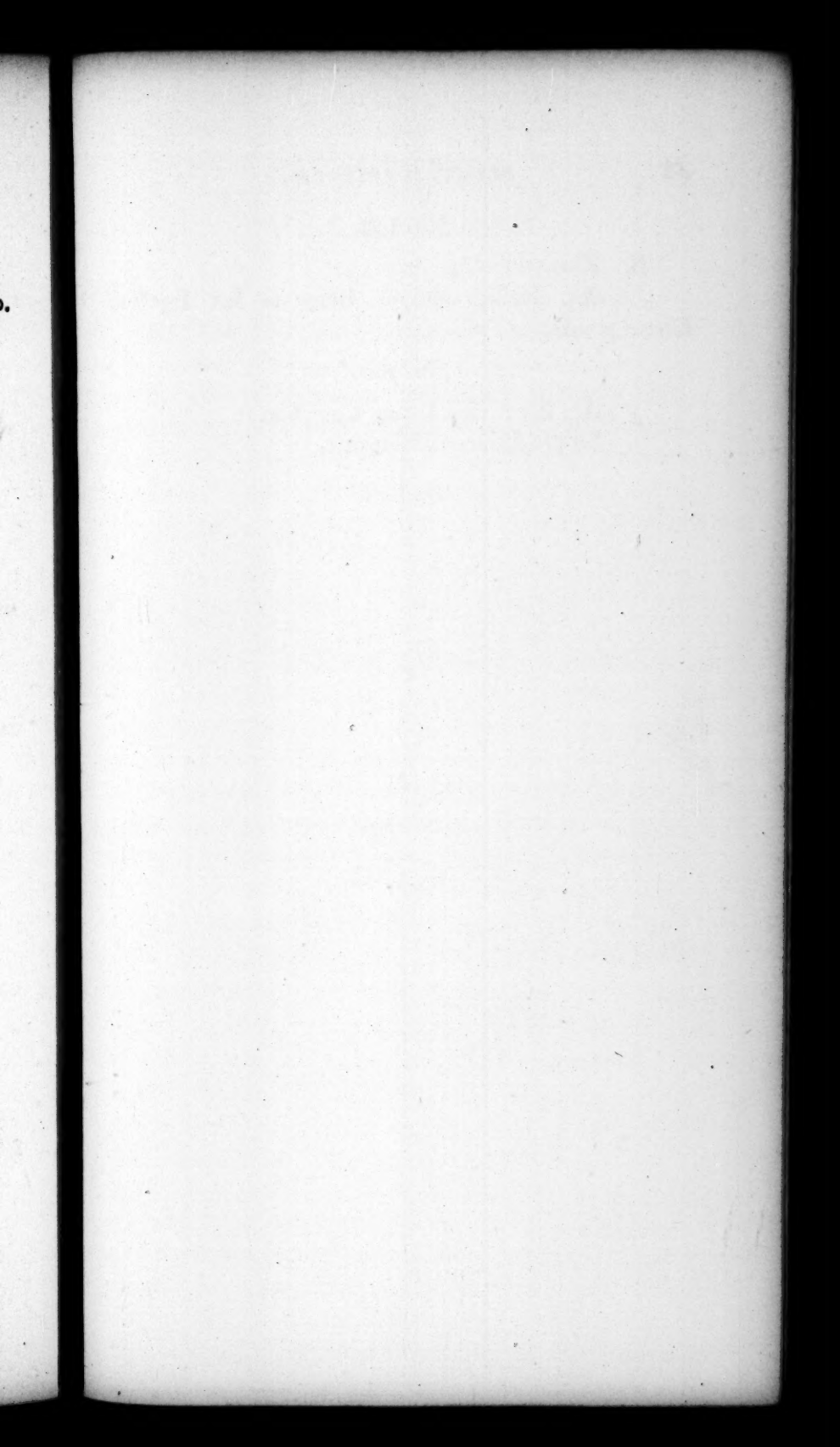
No. 199.

Rx Zinc. vitriol. gr. x.
Aq. Rosæ, unc. v. Solve ut fiat Injectio.
Utatur tepida.

No. 200.

Aq. Zinc. vitriol. cum Camphor.
Sit pro Lotione astringente.

FINIS.



Health consists in the right performance of the various functions of the body, or the capability of performing them - Disease is the inability to discharge any one or more of these functions.

(a.) It is not pretended that the intentions of nature are always beneficial, nor that she is always able to fulfill her intentions; but there certainly is often cause to say that her efforts remove the offending cause & restore health to the system.

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ELEMENTS

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PRACTICE OF PHYSIC.

INTRODUCTION.

THE human body is so constructed, that by the application of morbid causes, the nervous power, or living principle, is excited into more vigorous and frequent action, by which these causes are removed, the vitiated state of the fluids corrected, and obstructions of the viscera or other organs resolved. Diseases are then said to be cured by nature, or the spontaneous efforts of the animal œconomy. /a./

PATHOLOGY.

The efforts of the living principle are either universal or particular.

UNIVERSAL, when the whole vascular system is excited into encreased action by a general irritation.

PARTICULAR, when the irritation is slight, and confined to a part.

Regular and successive efforts are necessary for the cure of many diseases, and when not interrupted, require a given time for that purpose.

The powers of nature are chiefly deficient in the cure of chronic diseases, as Palsy, Dropsy, Hypochondriacal complaints, &c. &c. In such diseases, the efforts of the animal œconomy are too weak and languid.

In some diseases the increased action of the body is even hurtful, and may require to be moderated; as in calculous cases, in inflammation of the stomach and intestines, &c.

Hence a judicious physician is not always to be considered as the servant of nature, but frequently as her counsellor, and should employ his art to supply and correct her defects.

A knowledge of such principles as direct to the most successful indications in the cure of diseases, are derived from,

1. An accurate investigation of the proximate and remote causes of disease.

2. From general experience, the history of diseases, and the success of particular remedies, even though their operation or mode of action cannot be explained from any known laws of the animal œconomy.

In order to cure a disease, it becomes sometimes necessary for the physician to know the constitution, or peculiar temperament of his patient.

Such parts of the body as are naturally weak, require particular attention in the course of a disease.

A physician frequently does more good by quieting symptoms, than by exciting violent movements in the body.

The art of observing consists in attending to the time, and succession of the efforts of nature, especially in acute

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diseases; in chronic, to the operation of remedies, and in distinguishing between the effects of the disease, and the remedies employed.

The cure of a disease should be chiefly attempted either in its beginning, periods of remission, or intermission, and not in the paroxysm, unless with a view to palliate urgent symptoms.

Remedies should be always adapted to the state of the patient; gentle means are to be used in weak habits; more powerful and active remedies in stronger habits: nothing is to be attempted by sudden and violent means, which may, with equal safety, be affected by milder remedies; but in desperate cases, desperate remedies are to be employed.

A few active remedies, the efficacy of which has been established by experience, are to be preferred to the more doubtful and compounded: and in chronic disorders, remedies of approved efficacy, are not to be frequently changed, unless some new indications of cure occur from an alteration in the state of the disease.

The same disease, in different persons, cannot always be cured by the same remedy. The venereal disease, though attended with the same symptoms in different persons, will not yield to the same preparation of mercury; hence arises the necessity of trying new remedies, and of employing even different preparations of the same remedy.

In the application of remedies the season of the year is to be attended to.

In spring and summer, visceral obstructions, and many other chronic affections, are more easily removed, than in autumn and winter.

It is the duty of a physician to divert the force of a disease from the vital organs, to parts less necessary to life.

There are certain periods of disease when evacuations are most successfully excited, either by nature or art; profuse and early sweating in fevers gives no relief, but moderate sweating in a more advanced stage of the disease, often promotes recovery: hence is founded the idea of concoction, so much talked of by Sydenham.

It becomes frequently necessary to quiet urgent symptoms, though the remedies employed should be contraindicated by the cause of the disease; in inflammatory cases, this often prevents difficulties in the use of opium.

Critical evacuations are not to be checked nor interrupted, nor are remedies to be employed, which may excite other movements in the body at such critical periods.

In acute disorders, or during much pain, food is in general to be avoided, because it rather degenerates into a corrupted state than affords nourishment.

The more the strength of the body is impaired, the lighter should be the food, and of more easy digestion; it should be taken frequently, and in small quantities; on the contrary, the more strength the patient has, he may indulge with the greater safety in the use of solid and more nutritious aliment.

A disease is the impeded action of any function of the body.

The practice of medicine may be distinguished into **PATHOLOGY**, and **THERAPEUTICS**.

PATHOLOGY, includes a knowledge of the causes of diseases, their symptoms, seat, crisis, diagnosis, and prognosis.

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THERAPEUTICS comprehends the administration of remedies for their cure.

The causes of disease are predisposing, exciting, and proximate.

OF PREDISPOSING CAUSES.

1. Debility, by whatever means induced.
2. The diseased conformation or figure of the body.
3. The increased or diminished elasticity of the simple solids.
4. The more or less irritable state of the nervous system.
5. The qualities of the blood, and other fluids of the body.
6. The hereditary state of the body, favouring particular diseases in different periods of its growth.
7. The nature of preceding disorders.
8. The period of life, whether that of an infant, the adult, &c. &c.
9. The sex of the patient.

OF EXCITING CAUSES.

1. Violent passions of the mind, such as anger, love, grief, fear, shame, envy, joy.
2. A studious and anxious life, watchfulness, &c. &c.
3. Poisons, or the abuse of violent and active remedies.
4. Different qualities in the atmosphere, either sensible or latent; **MIASMATA OF CONTAGION.**

5. A defect, or suppression of natural evacuations.
 6. Errors in diet, either from the quantity or quality of our food.
 7. Mechanical injuries.
- These have been also called remote or occasional causes.
-

OF PROXIMATE CAUSES.

By the proximate cause is meant the real state of the diseased organ.

A knowledge of this subject can only be derived from

1. An investigation of the nature and powers of the more remote causes.
2. A careful attention to the symptoms, and the order of succession in which they occur in diseases.
3. The effects of the remedies employed.
4. The dissection of morbid bodies.

In this last case we should carefully distinguish between the effects and cause of the disease.

The investigation of proximate causes is most difficult, and the science of medicine is, in this respect, extremely imperfect.

OF THE SYMPTOMS OF DISEASE.

The præternatural phenomena which occur during a disease, are called symptoms.

These are either felt by the patient, or observed by the physician.

The effects which immediately arise from morbid causes, are called the symptoms of the cause.

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The first of the series of experiments was conducted on the 1st of January 1887. The object of the experiment was to determine the effect of the temperature of the water on the rate of the reaction. The results of the experiment were as follows:—

At 10° C. the rate of the reaction was 1.00
At 20° C. the rate of the reaction was 1.50
At 30° C. the rate of the reaction was 2.50
At 40° C. the rate of the reaction was 4.00
At 50° C. the rate of the reaction was 6.00
At 60° C. the rate of the reaction was 10.00
At 70° C. the rate of the reaction was 15.00
At 80° C. the rate of the reaction was 25.00
At 90° C. the rate of the reaction was 40.00
At 100° C. the rate of the reaction was 60.00

The second of the series of experiments was conducted on the 1st of February 1887. The object of the experiment was to determine the effect of the concentration of the solution on the rate of the reaction. The results of the experiment were as follows:—

At 1.0 M. the rate of the reaction was 1.00
At 2.0 M. the rate of the reaction was 2.00
At 3.0 M. the rate of the reaction was 3.00
At 4.0 M. the rate of the reaction was 4.00
At 5.0 M. the rate of the reaction was 5.00
At 6.0 M. the rate of the reaction was 6.00
At 7.0 M. the rate of the reaction was 7.00
At 8.0 M. the rate of the reaction was 8.00
At 9.0 M. the rate of the reaction was 9.00
At 10.0 M. the rate of the reaction was 10.00

The third of the series of experiments was conducted on the 1st of March 1887. The object of the experiment was to determine the effect of the volume of the solution on the rate of the reaction. The results of the experiment were as follows:—

At 100 ml. the rate of the reaction was 1.00
At 200 ml. the rate of the reaction was 2.00
At 300 ml. the rate of the reaction was 3.00
At 400 ml. the rate of the reaction was 4.00
At 500 ml. the rate of the reaction was 5.00
At 600 ml. the rate of the reaction was 6.00
At 700 ml. the rate of the reaction was 7.00
At 800 ml. the rate of the reaction was 8.00
At 900 ml. the rate of the reaction was 9.00
At 1000 ml. the rate of the reaction was 10.00

These symptoms may produce others, which are called the symptoms of the symptoms.

Every symptom points out a diseased state of some of the functions, either the *vital, natural, or animal*.

The symptoms of diseases, in the order they appear, and the circumstances which may operate in the animal œconomy, in diversifying their appearance, or rendering them anomalous, should be carefully observed.

All symptoms are to be explained from the action of the proximate cause, or the re-action of the living principle in the animal œconomy, excited with a view of expelling or destroying whatever is inimical to the body.

Many symptoms of diseases are to be explained by the law of sympathy.

OF THE CRISIS OF DISEASE.

By the crisis of a disease is meant a sudden change, either into health, or death.

A crisis is more perceptible in acute than in chronic diseases.

In acute diseases, an exacerbation of symptoms frequently precede the most favourable crisis, terminating in some sensible evacuations, which procure relief to the patient.

Evacuations, which are accompanied, or immediately followed, by a relief of symptoms, are favourable and critical, but not otherwise.

It was the opinion of Hippocrates, and is now that of many learned and judicious physicians, that critical days or periods may be accurately marked

from their regular and periodical returns, especially in acute diseases, and even in the fevers of our own country.

The critical days of continued fevers, are the 3d, 5th, 7th, 9th, 11th, 14th, 17th, 20th.

This doctrine is confirmed by the united testimony of De Haen and Cullen.

The regular course of nature may be interrupted, accelerated or retarded, by various circumstances in the animal economy, as well as by the injudicious practice of the physician.

OF THE DIAGNOSIS.

The Diagnosis is that part of pathology which treats of the specific agreement, or disagreement of symptoms, by which diseases may best be distinguished from one another.

This is of the utmost importance, and supposes an intimate knowledge of the leading and characteristic symptoms of all diseases.

OF THE PROGNOSIS.

This is the science of signs, by which we may foretell the event, or issue of a disease.

This supposes long experience, and contributes much to the reputation of the physician.

In this branch of pathology, Hippocrates and the ancients acquired great reputation.

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The prognosis is by no means conjectural, when founded on accurate observation and experience.

In forming an accurate prognosis, we must recollect our former observations in similar disorders; the effect of the disease in the same person at a former period; the degree of *vis vitæ* remaining; the importance of the organ affected to the life of the patient.

It is also of consequence to attend to the patient's age and sex, together with his former state of health; to the influence of climate, or prevailing contagion, and the period of the disorder, as the same symptoms occurring at different periods, are accompanied with more or less danger.

Symptoms of danger are more fallacious in acute than in chronic disorders.

The nature of critical discharges, and the symptoms usually preceding them, deserve our notice.

PART I.

OF THE

GENERAL DOCTRINE OF FEVER.

IN every fever there is some degree of chilliness, increase of heat, frequency of pulse, and diminution of strength in the animal functions.

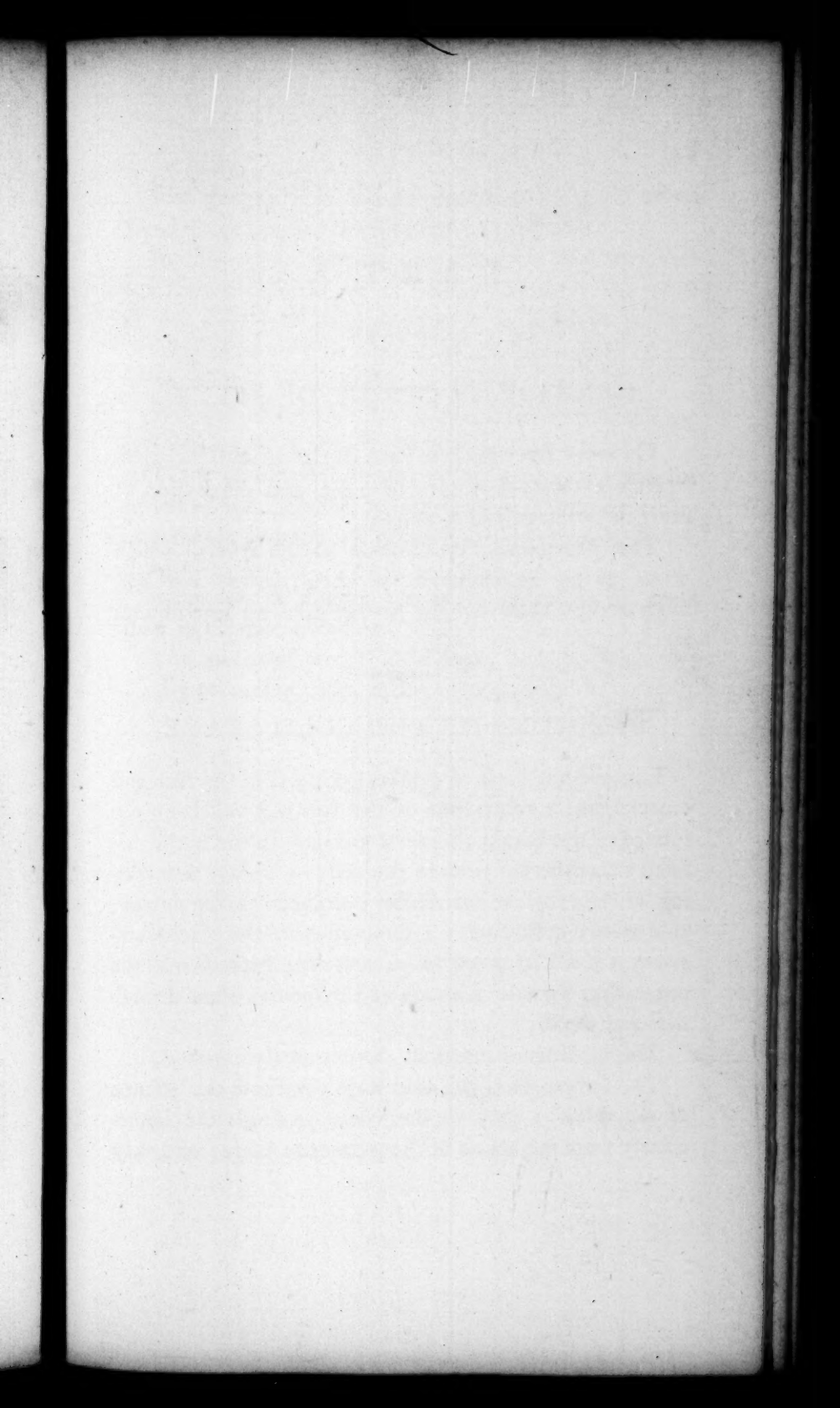
The phænomena in common to all fevers, which direct to an investigation of their causes, are best illustrated by observing the paroxysm of an intermittent fever.

SYMPTOMS OF THE COLD STAGE.

Languor and sense of debility; paleness in the face and extremities; a contraction of the skin and vessels on the surface of the body; a sense of coldness in the back, diffused into different parts of the body; a tremor terminating in rigor; great insensibility; dryness of the mouth; pale urine; costiveness; a diminution of the usual secretions; a small irregular pulse; anxiety; oppression at the præcordia; sometimes cough and dyspnoea; often drowsiness and stupor.

The intellectual functions are frequently impeded.

The symptoms of the cold stage constitute the essence of the disease; they are the effects arising more immediately from the action of the proximate cause; and they



are the means of producing that re-action of the system which terminates in the succeeding stage of the paroxysm.

SYMPTOMS OF THE HOT STAGE.

The sense of cold becomes less violent; a heat greater than natural prevails, and arising from the præcordia, is diffused over the whole body, at first irregularly by alternating flushes, becoming more intense and permanent; the colour of the skin returns, with tension and redness; the features of the face, and other parts of the body, recover their usual size; head-ach; a pain in the back, and often in the extremities; urine high coloured, with a strong hard pulse.

The symptoms of the hot stage terminate in the crisis, resolution of the fever, or sweating stage.

THE SWEATING STAGE.

The pulse becomes free and large; the organs of secretion are relaxed; the circulation is free and pervious on the skin, producing softness, and moisture; the urine deposits a sediment; the belly is open; the functions of the mind and the sensibility of the body are restored.

Though we have pointed out the ordinary course of symptoms which occur in the paroxysm of an intermittent fever, yet it is seldom that all these symptoms are present in the same person, and circumstances frequently happen which pervert the order of them, and render them anomalous.

In continued fevers, there is a disposition to regular paroxysms, but they are seldom so complete as to terminate in perfect intermissions; they generally however assume remitting appearances, and the periods of remission are often regular and steady.

This has given rise to the distribution of fever into continued, remittent, and intermittent.

THE REMOTE CAUSES OF FEVER.

They are such, as in consequence of acting on the moving powers, induce the cold fit.

Of these are **MIASMATA** and **CONTAGION**: of the first, are the effluvia of marshy and moist grounds; chiefly occurring in warmer climates, in a degree however in all countries, and producing the same fevers, only differing in their degree of violence.

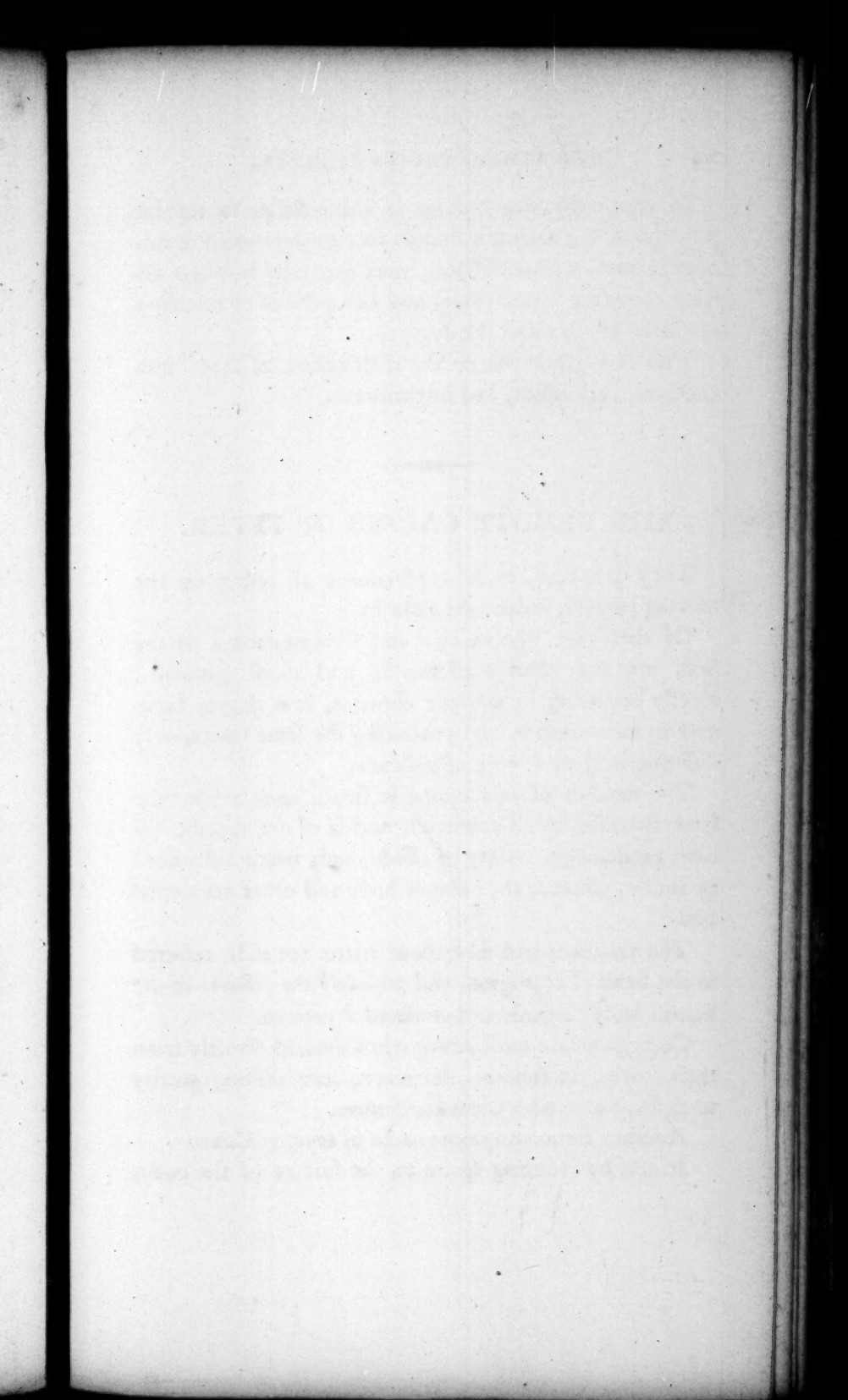
The number of contagions is small, each retains the same character in all countries, and is of one specific nature, producing a variety of effects, only when influenced by season, climate, the habit of body and other accidental causes.

The variolous and morbillous matter are to be referred to the head of contagion, and probably the effluvia of the human body in gaols and confined situations.

Contagions are most active when applied directly from their sources or fomites, the atmosphere assisting greatly to destroy or render them inoffensive.

Another frequent remote cause of fever is **COLD**.

It acts by inducing spasm on the surface of the body,



particularly in those, the vigour of whose circulation has been considerably weakened.

According to the state of the habit to which it is applied, it is capable of producing inflammatory diathesis, as in the case of rheumatism, in others it produces catarrh, and in many continued fever.

When applied in an extreme degree, so as to exert its sedative powers, it extinguishes life, and produces gangrene.

Other remote causes of fever, are the sedative passions of fear, grief, and anxiety.

Intemperance in drinking and venery assist in producing fever, especially when favoured by the concurrence of miasmata, contagion, and the action of other sedative powers.

Retention of putrid and acrid matter in the *primæ viæ*, from indigestible or corrupted food, or fæces in the intestines, concur in the production of fever.

Direct stimulants, though they increase the pulse, and animal heat, are seldom capable of producing fever.

OF THE PROXIMATE CAUSE OF FEVER.

IN attending to the symptoms of languor and debility preceding the cold fit, and to the succession of the three stages of an entire paroxysm, we may suppose that cause and effect are in the same order, viz; that the debility induced, favours the spasm on the skin, which is productive of the cold fit; that the cold fit is the cause, by its effect on the heart and arteries, of promoting that excitement, or greater action of the vascular system,

which is productive of the hot fit, and that the resistance is overcome by the hot fit, which terminates in the restoration of secretion, both on the surface of the body, and the other organs of secretion in the system.

It therefore appears that the most frequent occasional causes of fever produce primarily a sedative effect, and that that effect becomes a stimulus in the system, exciting more action in the heart and arteries.

We suppose, therefore, that in every fever there is a power applied to the body, which has a tendency to destroy it; but that the *VIS MEDICATRIX NATURÆ* is roused to obviate such noxious powers, or to correct and remove them: so that in fevers it may be said that there are two powers acting, the one of a sedative nature, the other stimulant.

In every fever there is a tendency to certain regular or periodical movements, attended with obscure marks of remission and exacerbation, even in the most continued. These remissions differ in the frequency of their return, producing the variety of quotidian, tertian, or quartan periods, according to the intervals of paroxysms.

OF THE PROGNOSIS IN FEVER.

This will depend on the prevalence of morbid or salutary symptoms; how far the excitement in the system is adequate to remove the noxious power, or how far it is properly directed to that part of the body, by the action of which the resolution of the disease is best effected.

If the excitement, or re-action, be too violent, as in

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inflammatory fever, it often destroys the vital power and organization of the part; this is a frequent cause of death, especially affecting the brain in continued fevers.

The action of the sedative power, particularly in the case of contagion, tends to extinguish the vital principle, by acting on the nerves, and inducing symptoms of debility.

In such cases as are denominated putrid, the alteration of the texture of the blood, and weakness of its vessels, are productive of profuse hæmorrhage, effusions under the skin, petechiæ, and other malignant eruptions, accompanied by a disposition to gangrene.

The symptoms which evidently point out the prevalence of danger, compared with the salutary symptoms, will be considered in treating of particular fevers.

In forming a judgment of the event of a disease, attention should be paid to the remissions, the regular movements, and the critical days, which in most cases are accompanied with some sensible change in the secretions, the pulse, or the state of the head.

An exacerbation of symptoms frequently precedes a salutary and happy crisis.

OF THE GENERAL CURE OF FEVER.

In the cure of fever, our attention should be first directed towards moderating any irritation, which may increase the disease, or disturb the regular and salutary periods.

1. All disagreeable and violent impressions on the mind are to be avoided.

2. The stimulus of external heat is to be removed, as well by keeping the patient in a large and airy room, as by diminishing the quantity of bed-clothes.

3. The exercise of the body, or the exertion of muscular power, as in speaking; even the stimulus of light, is to be avoided, as they increase debility in weak habits.

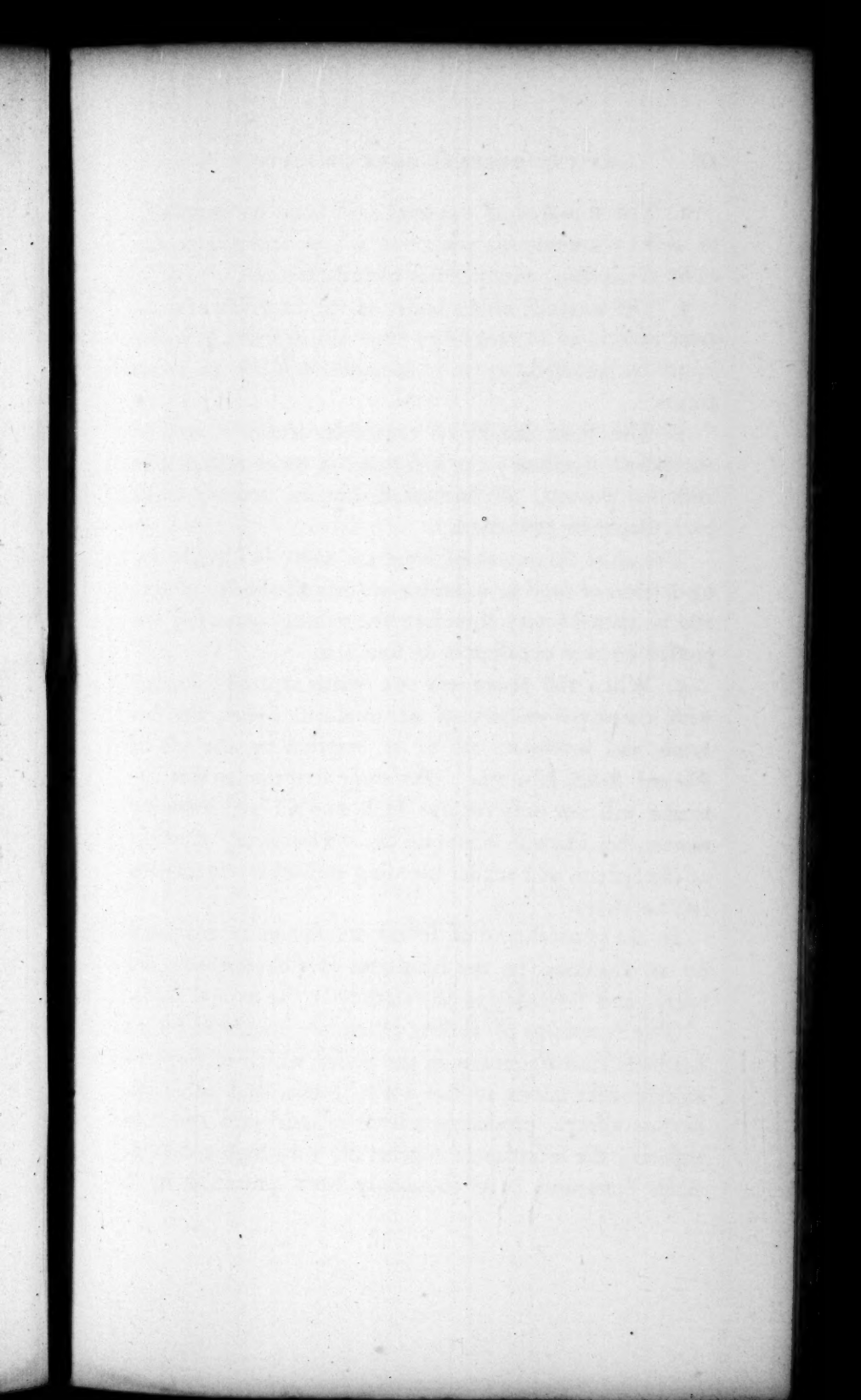
4. The food should be vegetable, ascenscent, and of the easiest digestion; the best drink is water acidulated; and, in general, all fermented liquors, except small beer, should be forbidden.

The usual symptoms of fever are increased by the introduction of food or nourishment into the body, especially of animal food; therefore the anxiety generally expressed on that occasion is ill founded.

5. When the *prime via* are preternaturally loaded with corrupted matter, or accumulated fæces, the stomach and intestines are to be emptied by the use of *Formul. Select.* No. 174. An early attention to this particular will not only remove such morbid and irritating matter, but likewise moderate the inflammatory diathesis of the system, and render bleeding and other evacuations less necessary.

In the general cure of fevers we should be regulated by an attention to the symptoms of violent action, debility, and tendency to putrefcency in the animal fluids.

The symptoms of violent action are increased force; hardness, and frequency in the pulse, which often particularly determines to the brain, lungs, and other important viscera, producing a sense of local pain and congestion; the secretions are generally very high coloured. Such symptoms have commonly been preceded by a



severe cold fit, and point out the inflammatory diathesis of the habit.

The symptoms of debility are a weakness and irregularity of the voluntary motions, as subfultus tendinum, as well as of sensations and intellectual operations; weakness of the pulse; coldness of the extremities; a tendency to fainting in an erect posture, and a sighing in respiration; involuntary discharges, and difficult deglutition.

The symptoms indicating a tendency to putrefaction are, a loathing of animal food, great thirst, and a desire for acids; the blood loose in its texture; hæmorrhage from the organs of secretion, without marks of great excitement; effusions under the skin or cuticle, producing petechial and livid eruptions; frequent loose and fœtid stools, with little relief; fœtid urine, and a cadaverous smell of the whole body.

The symptoms of *violent action* are best moderated by *blood-letting*.

The effect of bleeding is more immediately felt, in reducing the inflammatory action, than any other evacuation.

It requires much skill to determine in what cases it may always be successfully employed.

It ought chiefly to be had recourse to in the early stage of fever.

The young, the vigorous, and plethoric, bear it best

The spring and winter seasons demand it most

The inflammatory diathesis is more prevalent in cold than in warm climates; this however is not altogether a general rule, for in the warmest countries, local inflammation, especially of the liver, is more frequent and

acute than in cold countries, and gives way, chiefly, to early bleeding.

In epidemic and contagious diseases much caution is necessary in the use of the lancet.

Attention should be paid to the former diseases and habits of the patient.

The appearance of the blood, and the effects of blood-letting, which may have been already practised, ought likewise to regulate our conduct.

A sudden and large evacuation often answers best, especially when made in a relaxed or supine posture.

Evacuation by stool likewise moderates the violent action of the system.

The effect of purging is not only that of emptying the intestines, but likewise the vascular system distributed upon them.

This evacuation does not so suddenly weaken the system, nor reduce the inflammatory diathesis as blood-letting; it has however frequently its advantage, especially in doubtful cases of increased action.

In the more advanced stage of fever, purging may not only be useful, in so far as it empties the intestines, and removes the putrescent and irritating matter of the bowels; but when employed in the beginning may do good by moderating the general action of the system.

Symptoms of violent action are moderated by plentiful *dilution*, especially of watery fluids, acidulated or accompanied with some of the neutral salts.

Sweating frequently tends to moderate the violent action of fever, when produced by gentle and relaxing means, in opposition to external heat and powerful stimulants.

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This evacuation is frequently spontaneous and moderate, producing the solution of the disease, and is often successfully excited by art.

In many cases where it is early and profuse, it protracts the disease, and exhausts the patient's strength. This is frequently perceived to be the case in rheumatic fevers.

If it does not relieve in twenty-four hours, it seldom does good.

A relaxed soft skin, opposed to a dry burning heat, is more favourable than a copious discharge.

Partial sweating is always hurtful.

In case of violent action, sweating is most safely induced by nauseating doses of emetics, especially the antimonial.

For this purpose tartarised antimony should be employed in small and divided doses in solution.

This, in general, will likewise prove gently laxative, which renders the practice of sweating much safer in many doubtful cases of inflammatory diathesis. Other preparations of antimony may likewise be employed, which, by their slow solubility in the stomach, are less apt to excite vomiting. Of these are all the calcined preparations of antimony, in imitation of Dr. James's powder.

In the early stages of fever, great advantages are derived from the combination of antimonial with purgative remedies.—Vide *Formul. Select.* No. 173.

When tartarised antimony is given in solution, it ought to be dissolved in wine.

During the use of the calcined preparations of antimony, acids should be avoided, which might render their operation too violent.

Under the nauseating operation of antimonial preparations, the febrile anxiety, and even delirium, is often encreased, until some sensible evacuation is induced, which removes those symptoms, and brings on a crisis of the disease.

The general action of the system is encreased by *blisters*, though the violent action of a particular and deeply seated part is lessened by them. They seem to act more from their power of stimulating than their power of evacuating.

They are chiefly indicated in case of local pain and congestion in the beginning of fevers; and in the later stages they may be more freely employed to keep up the *vis vitæ* of the patient.

Sinapisms and *rubefacients* seem to act upon the same principles.

Fomentations to the lower extremities, frequently relieve the head in cases of greater action, and by determining to the skin, remove the resistance and spasm upon the surface of the body.

The symptoms of *debility*, the most frequent cause of which is contagion applied to the body, are best counteracted by the free access of cold air, which corrects and even destroys its action.

In some cases, cold water has even been successfully applied for this purpose.

Debility is greatly moderated by the action of tonic and stimulating remedies. To this head belongs the use of bark, *serpentaria*, and wine.—Vide *Formul. Select.* Pag. 15, 16, 41.

Bark ought chiefly to be employed in cases of remission, with a soft skin, where the secretions, at least once in twenty-four hours, are somewhat more liberal.—In

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cases of violent heat, a dryness of the skin, a very quick pulse, and symptoms of local congestion, it should not be employed.

The serpentaria, or contrayerva will often support the *vis vitæ* in low fevers, and rather promote the natural crisis of the disease.

In cases of extreme debility, with unequal and irregular heat, a low quick pulse, and much watchfulness, wine may be employed with great advantages: and sleep, in all cases of low fever, should be procured by opiates.

In all cases of debility, much evacuation by stool is to be avoided.

The crisis of a low fever is generally best effected by sound sleep, or spontaneous salivation.

The symptoms indicating a tendency to *putridity* are obviated by removing the patient from putrid or corrupted air.

By a frequent change of bed-clothes and linen.

By vegetable and ascescent food.

By evacuating the contents of the bowels by cooling and ascescent purgatives, such as crystals of tartar and tamarinds, which likewise, by their antiseptic and diluent effect, correct the general state of the animal fluids.

When symptoms of putrefaction are accompanied with symptoms of great debility, then bark and other tonics may be employed with advantage.

Bark is too active a remedy to be employed with safety in all cases of continued fever; it should never be given in cases of inflammatory diathesis; even in other fevers its good effects are chiefly perceived in cases of remission, as before observed.

22 OF THE GENERAL DIVISION OF FEVERS.

In the general cure of fever we have rather spoken of general indications than of the application of particular remedies.

OF THE GENERAL DIVISION OF FEVERS.

Notwithstanding that in all fevers there is a disposition to periodical returns and occasional exacerbation ; yet in some they are scarcely obvious, in others more apparent, and in intermittent fever, perfect and complete.

This has given rise to a division of fevers into continued, remittent, and intermittent.

The continued are either *inflammatory*, accompanied with violent action ; *nervous*, attended with debility ; or *malignant*, attended with appearances of *putrescency*.

In general, however, they are not so distinctly marked, and in common practice we find them of a mixed nature, and changing into one another, except when some particular contagion has operated. But as in all fevers the plan of cure must be adapted to the state of *increased action*, *debility*, or *putrescency*, we shall admit this division of continued fevers into *inflammatory*, *nervous*, and *malignant*.

OF THE INFLAMMATORY FEVER.

The symptoms of the inflammatory fever are, a sense of lassitude, debility, and pain, universally felt in the bones ; chilliness and heat alternating with one another ; the pain becomes more severely felt in the shoulders, back, knees, and head ; the heat becomes intense, with

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redness of the skin, especially of the eyes and face; watchfulness; anxiety; a white tongue; dry skin; high coloured urine; and inflamed blood; costiveness, and delirium.

This fever generally attacks those who are of a strong plethoric habit of body; seldom the weak and relaxed: it seizes men more frequently than women.

Its occasional causes are the sudden application of cold to a heated body; violent exercise, while exposed to the burning rays of the sun; intemperance in eating, and in drinking vinous and spirituous liquors.

It generally kills, by inducing inflammation and gangrene on internal parts.

By bad management, especially the neglect of evacuations, and the too early use of stimulants, it often degenerates into low or malignant fever.

The symptoms of danger are delirium, difficult respiration, symptomatic eruptions, intense heat, a very quick pulse, and involuntary evacuations; which may be opposed to a softness of the skin, moderate heat, and fever, and a regular freedom of the secretions, neither obstructed on the one hand, nor profuse or colliquative on the other.

The cure of this disease is best effected,

1. By blood letting, proportioned to the state of the pulse and strength of the patient.
2. By the means already laid down in order to moderate violent action, viz; the use of diluents, with acids and the neutral salts; evacuating the *primæ viæ*, and determining to the skin by antimonials in emetic or nauseating doses, or joined with purgatives; abstinence from animal food, and the application of blisters to

relieve local pain and congestion.—Vide *Formul. Select.* No. 26, 27, 115, 173.

Symptoms of debility, or putrefaction, occurring in the latter periods of inflammatory fever, are to be treated as hereafter directed on the subjects of the nervous and putrid or malignant fever.

OF THE NERVOUS FEVER.

In this fever, the symptoms of *debility* are chiefly prevalent; dejection and terror of mind; loss of appetite; oppression; watchfulness; sighing; great lassitude; alternate chilliness and flushing: in a few days giddiness and pain in the head; nausea, and vomiting of an insipid pituitous matter; prostration of strength; fainting on sitting in the erect posture; frequent, weak and often intermittent pulse, with little heat and thirst; a moist tongue, with a white mucus on it; pale watery urine; oppression of the præcordia; unequal distribution of blood to different parts of the body; a coldness in the extremities; a slight delirium, without fury; a disposition to immoderate sweating, or diarrhœa; insensibility to external objects; a tremor of the tongue; with *subfus-tus tendinum*, *coma*, involuntary discharges by urine and stool, convulsions, and death.

A more favourable termination takes place when there is an early disposition to salivation, and sometimes a gentle moisture on the skin; or diarrhœa comes on, which relieves the head, renders the pulse more steady, and proves a crisis to the disease. Deafness is a favourable symptom, which is generally accompanied with pro-

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found sleeping, and which is easily distinguished from *coma*. Scabby, angry eruptions, and tumours, always relieve; while miliary eruptions, which generally attend profuse sweating, are only symptomatic.

The *Dangerous symptoms* are,

Delirium with profuse evacuations, partial sweating about the breast and head, with cold extremities; *subfultus tendinum*; great watchfulness; quick, low pulse; tremulous motions of the lips, tongue, and other parts, with impeded deglutition.

The *remote causes* of this fever are, a relaxed, weak, and irritable nervous system; profuse evacuations; anxiety; watchfulness; fatigue; debility, induced by former diseases, increased by coldness and moisture, and in some cases the action of sedative poisons, *miasmata* and *contagion*.

From what has been said on the *proximate cause* of fever in general, and the state of weaker action in the moving powers, an explanation of the symptoms of this fever is easy.

It is easily distinguished from the inflammatory fever, which is accompanied with more violent action, and the *inflammatory diathesis*.

OF THE CURE OF THE NERVOUS FEVER.

In the cure of this fever, all violent evacuations are to be avoided, while a chief attention is to be paid in supporting the *vis vite* through the course of the disease.

In the beginning, it is proper to give a vomit of ipecacuanha, or tartarised antimony. Patients bear vomiting better than purging in this disease: A few grains of rhubarb and magnesia will be sufficient to keep the body soluble, or emollient clysters given from time to time.

In this fever, wine is one of the best cordials: it may be given either by itself, diluted with water, or made into whey; it is most grateful when cold; it renders the pulse slower and fuller, procures sleep, takes off delirium, and supports the patient under profuse sweats and symptomatic eruptions.

The serpentaria and contrayerva are powerful cordials, especially the former, and determine gently to the skin in this disease.—Vide *Formul. Select.* No. 177.

In cases of much anxiety and oppression at the *præcordia*, which frequently accompany and precede miliary eruptions, advantage may be derived from camphor.—Vide *Formul. Select.* No. 46, 47, 48, &c.

In the early stage of this disease, and through the whole course of it, blisters may be applied with great advantage, especially to the extremities; and the state of the *vis vite* may be known by attending to the degree of inflammation which is produced from their stimulus.

In the delirium of this fever, with *subsultus tendinum*, the *Mist. Mosch. Ph. Lond.* may be used with advantage, especially when joined to small doses of *Tinct. Opii*.—Vide *Formul. Select.* No. 130, 131.

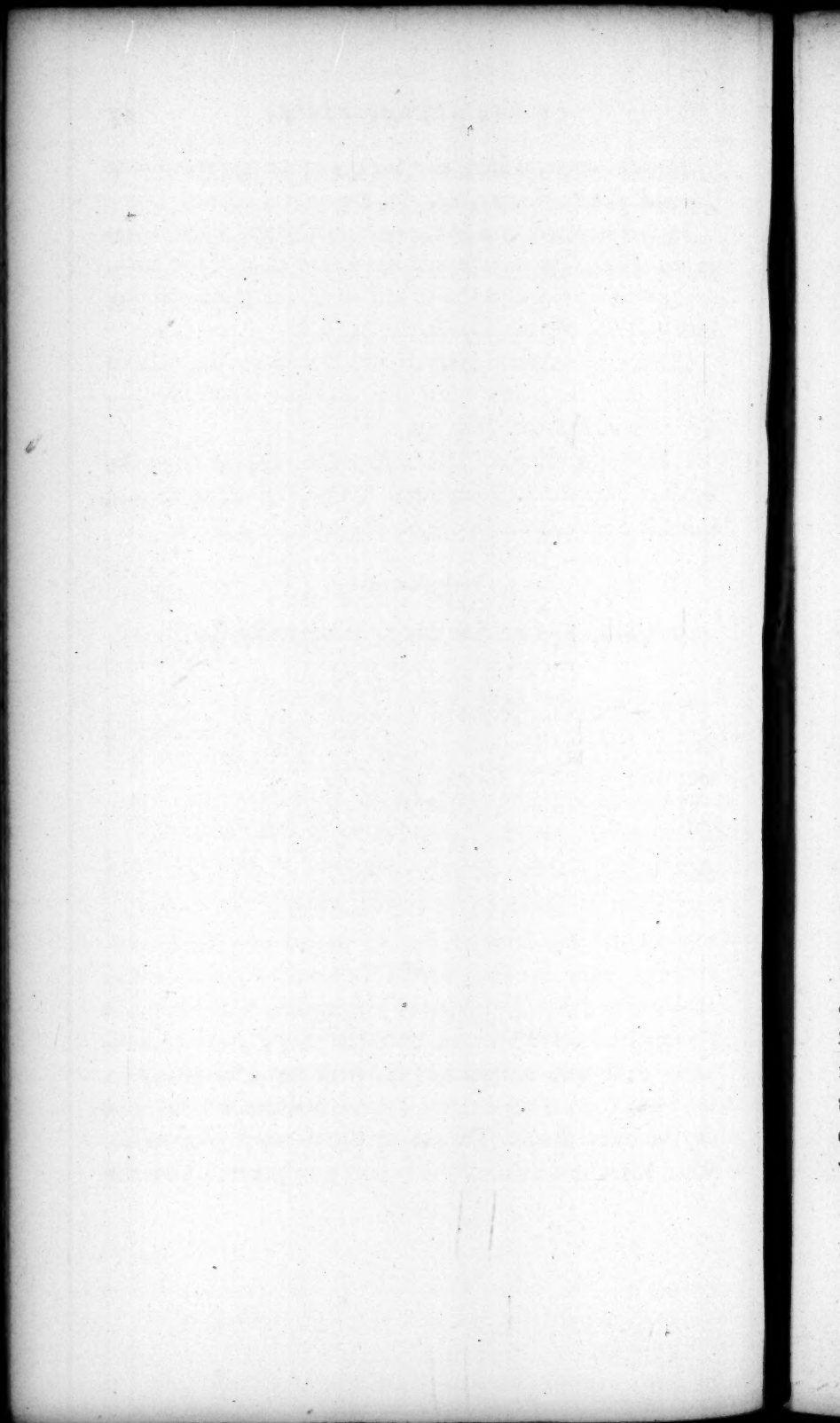
In cases of watchfulness, with, or without delirium, the *Tinct. Opii* in the dose of ten or twenty drops, may be given to procure sleep. *30 or 40. Dose.*

Sleep and perspiration are procured by fomentations with vinegar and water, applied to the lower extremities.

& Spec. bark - as the object of emet. in this
case is the agitation in the act of
vomiting. - Follow with cathart.
& this of calomel. - Then excite dia-
phoresis. - by Lops - Sp^t Minder. -
Contraergena - Pulv. Dov. &c. -
Then delirium is threatened
blister head, &c. -

Attend to perfect rest in
every respect - & perfect clean-
liness - nourishment of easy
digestion, & wine in various
forms. - Indulge particu-
lar appetites in general. -

Upon exposure to cold con-
sult the restrictions & rules
of Dr. Currie. -



In cases of remission, the bark may be given.—Vide *Formul. Select.* No. 65, 66, 67, &c.

In symptomatic and colliquative diarrhoea, a few drops of the *Tinct. Opii* may be added to each dose of the bark, or a grain of ipecacuanha to ten or fifteen grains of rhu-barb.—Vide *Formul. Select.* No. 116.

In case of extreme lowness and dejection, the volatile alkali may be given with the aromatic confection.—Vide *Formul. Select.* No. 14.

Castor and valerian will be found to relieve from the sighing, terror, and anxiety, which, in delicate and irritable habits occur in a high degree in this fever.

OF THE MALIGNANT, PETECHIAL, OR PUTRID FEVER.

This fever has acquired its name from its malignant nature, the putrescent state of the secretions, and the livid eruptions which constantly attend it.

The Symptoms are an intense heat, alternating with chilliness, with some remission; a hard, small, frequent, and irregular pulse; a violent pulsation of the temporal and carotid arteries; great prostration of strength; anxiety and dejection of spirits; nausea and bilious vomiting; pain in the head; inflamed eyes; *tinnitus aurium*; a difficult, laborious respiration, with frequent sighing, and foetid breath; universal pain; great restlessness; delirium; a foul tongue, with foetid fordes about the teeth; great thirst; the tongue sometimes black and dry without thirst: The urine varies much, sometimes when there is a delirium, it is pale; in general, however

it is fœtid and high coloured, and all the other secretions are in the same state; involuntary evacuations; hæmorrhages with dissolved blood, and universal livid and petechial eruptions, with gangrenous *aphthæ* in the mouth and throat.——

This disease assumes a great variety of appearances: Sometimes the symptoms are inflammatory in the beginning, in which case, there is rigor, followed by encreased action; in other cases, the disease more early affects the nerves, resembling the nervous fever above described; in general there is much debility in the beginning, which prevails more or less with the symptoms of putridity already described.

The remote causes of this disease are;

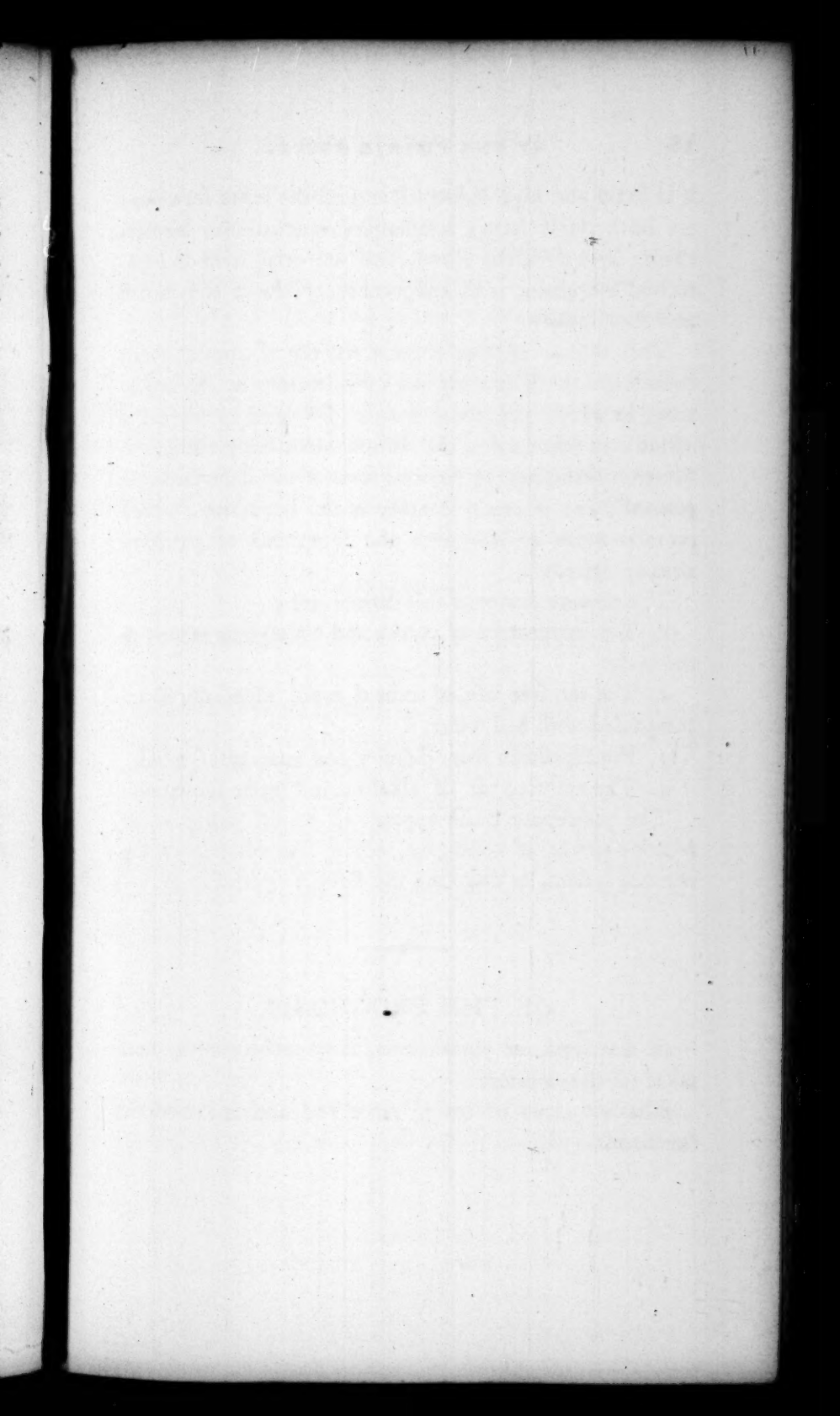
1. The application of putrid and contagious matter to the body.
2. The too free use of animal food, especially if accompanied with bad water.
3. Predisposition from debility and anxiety of mind.
4. The too free use of alkaline and septic substances.

The proximate cause appears to consist either in the sedative power of contagion, acting immediately on the nervous system, or disposing the fluids to putrescency.

OF THE PROGNOSIS.

A diarrhœa, or perspiration, frequently relieves and takes off the delirium.

The eruptions becoming more red and inflamed, is favourable.



As this fever is considered to
differ in degree chiefly from
the nervous, so the treatment
should be governed by the
same gen. principles. -

Numerous livid, petechial eruptions; black and gangrenous *aphthæ*; dry, black tongue, with delirium; plucking the bed-clothes; no thirst; difficult respiration; tension of the abdomen, with fœtid and involuntary stools; partial and clammy sweats; cold extremities; a quick, weak, and irregular pulse, are extremely fatal symptoms.

OF THE CURE OF THE PUTRID FEVER.

In cases of plethora, with much increased action in the beginning, it may be proper to take away a few ounces of blood; this evacuation should however be managed with the greatest caution, and in no cases should it be repeated. The head may be relieved with more safety by the application of leeches, or cupping-glasses.

The *primæ viæ* are to be evacuated by the early use of cathartics, with or without antimony; and if in the course of the disease there is much tension, and determination on the bowels, a preference should be given to the neutral and ascendent purgatives. *calomel.*

Emollient clysters, either of warm water, or of the *Decoct. pro Enemat.* tend greatly to dilute the acrimony and fœtor of the contents of the large intestines. They obviate that dangerous tension of the abdomen which occurs in this disorder. *3 or 6 times a day.*

A determination on the skin should be kept up by the use of camphor mixture, with the vegetable acids, which are preferable to the fossil.

The cordial and antiseptic practice should be united; this will lead to the use of wine, bark, and acids.

Rhenish wine, or old hock, is the most pleasant. *a*

The cravings of the patient should be attended to in the use of food and drink; they will always direct to the ascendent and antiseptic.

In this, as in other fevers, bark should only be given in such cases as point out some obscure remission, and where there is no local congestion on the internal viscera. It often relieves from profuse and symptomatic sweatings; its purgative effect is best corrected by small doses of the *Tinæ. Opii*, and in case of costiveness it should be accompanied with small doses of rhubarb.

Bark is much safer in its operation when accompanied with acids; in cases where a determination on the skin is desired, the *Aq. Ammon. acct.* may be given along with it.

Symptomatic diarrhœa may be moderated either by opiates alone, or united with aromatics.—Vide *Formul. Select.* No. 141, 143.

In the diarrhœa of a malignant fever, the *Infus. Rosæ*, and the *Julep salin.* in an effervescent state may be useful, from their correcting the putrid matter of the bowels.

Blisters are only useful in supporting the *vis vitæ* in the decline of this disease.

In cases of *aphthæ*, the *Decoct. commun.* gently acidulated, is frequently proper as a gargle.

The epidemic and remitting fevers of warm climates, are chiefly of the malignant kind, but in the beginning are sometimes accompanied with so much increased action as to render it necessary to take away a few ounces of blood.

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They differ chiefly from the putrid fevers of this country, in having more oppression on the præcordia, a sense of greater pain in the region of the stomach and liver, with early vomiting of a very acrid and offensive bile. The skin is generally tinged of a yellow colour; hence the disease has been called the bilious, or yellow fever.

In the East Indies, where persons are exposed not only to intense heat, but likewise to the putrid effluvia of wet mud, the symptoms of debility are greater, and the progress of the disease is more rapid and fatal.

The cure consists chiefly in early evacuations by the *primæ viæ*, as above directed, and in cases of early remission, the bark with acids, and other antiseptics, should be given with freedom.—Vide *Formul. Select.* No. 67.

In comparing the different accounts of practical writers on the subject of fevers of different countries, and more particularly on the bilious and remitting fevers of warm climates, it appears that they do not differ essentially from the foregoing; but as varieties, influenced by climate and the general state of the atmosphere, and different temperaments, or constitutions; and that the continued, and remitting fevers are the same, requiring a method of cure suited to the state of *reaction*, *debility*, or tendency to *putridity*, the prevalence of *bile*, and the degree of *remission*.

Remissions are best effected by assisting to carry off bilious accumulations by the united operation of tartarised antimony, the neutral salts, or ascendent laxatives.

OF INTERMITTENT FEVERS.

The symptoms of these have been already described under the title of *general fevers*, in the various stages of the paroxysm.

They are distinguished by Sydenham into vernal and autumnal, the former frequently accompanied with inflammatory diathesis, the latter with the putrid.

They are distinguishable according to the frequency and duration of the interval, into single quotidians, tertians, or quartans, or into the duplicate quotidians, tertians, or quartans, and perhaps on certain occasions they may be still more anomalous.

They generally arise from the exhalation of marshy and low situations.

The predisposition is relaxation and weakness, either induced by former disease, or by a thin watery and vegetable diet.

Between the paroxysms there is a tendency to sweating, and an impaired appetite.

OF THE PROGNOSIS.

The duration of the disease depends much on the character of the prevailing epidemic.

The more regular the return of paroxysms the more favourable is the disease. *when established.*

Epidemic intermittents are of more difficult cure than sporadic ones; quartans, than tertians; autumnal, than vernal.

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Quotidian intermittents have by some been thought to terminate in continued fevers.

Appearances of jaundice and dropsy point out diseased viscera, which require a particular method of cure.

OF THE CURE OF INTERMITTENTS.

In the cure of intermittent fever, an attention should be paid to prevent the recurrence of paroxysms, and to conduct them in such a manner as to render the solution of the disease perfect.

The recurrence of paroxysms is best prevented, or their violence moderated,

1. By the exhibition of an emetic, so that its operation be nearly over before the accession of the cold fit.

2. By the use of tonics, of which there is great variety, either astringents alone, bitters alone, astringents and bitters united, astringents and aromatics, metallic preparations, and opiates.

The tone of the system may be further kept up by occasional stimulants, a generous diet, the use of wine, employed especially in the period of intermission.

Of all tonic remedies, the Peruvian bark is justly esteemed the most effectual.

It may be employed with great safety in any period of intermittent fever, provided there be neither inflammation, nor appearances of obstruction in the abdominal viscera.

Obstructions of the liver, dropsies, and other consequences of intermittents, which have been commonly

attributed to the bark, take their rise from the recurrence of paroxysms, from the neglect of bark in the beginning, or from not using it in sufficient quantity.

In the intermittents of some climates, accompanying particular epidemics, the intermission is not always perfect; however, the bark should be given largely to obviate the danger arising from exacerbations, and the recurrence of paroxysms.

The bark should be given largely, especially as near the accession of the paroxysm as possible.

It should be continued until the patient has missed several paroxysms, and afterwards the quantity diminished by slow degrees.

Opiates given in the hot fit, shorten its duration, and render the solution of the disease more perfect and complete—Opiates, when given in the cold stage, though less effectual, than in the hot stage, will shorten the paroxysm—The costiveness induced by them is best removed by the *Pilul. Myrrh. cum Aloe*, which may accompany their use.

Notwithstanding evacuations have no tendency to cure agues, and when used too freely rather dispose them to return, yet accumulations in the *primæ viæ* should be removed in some constitutions by vitriolated kali and rhubarb, in others by the warmest laxatives of aloes and myrrh.—Vide *Formul. Select.* No. 8, 9, 123.

If it should be found impossible to give the bark by the mouth, it has been proposed to give it largely in the form of a clyster. — *A* —

The tonic plan of cure, assisted by regular exercise in a good air, should be persevered in, to obviate a relapse,

Asenic a remedy undoubtedly
efficacious - & perhaps prefera-
ble in cases where there is inflam-
matory diathesis. -

Dr. B. has not much faith in
this practice - I think that
no advantage at all can arise
from wearing cloaths quilted
with bark. -

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to which patients labouring under intermittents are extremely subject.

OF INFLAMMATION IN GENERAL.

In all cases of inflammation, there is redness, tumour, and increased action of the vessels, either of the inflamed part alone, or of the whole system; tension, pain, greater irritability, and an impaired action of the organ affected. In general, the blood taken from the arm remains longer in a fluid state, and in cooling shews a glutinous separation on the surface, commonly called the inflammatory buff.

Inflammation has acquired different names, according to its seat, as *Phlegmon*, *Erysipelas*, &c.

It is most commonly produced by stimulants directly applied to the part affected, but it is frequently also formed in the hot fit of a fever, by the violent action of the arterial system producing an unequal distribution of blood; in this case particular organs suffer from a larger quantity of blood directed upon them. The general system being affected, an *inflammatory diathesis* prevails, and the cold stage of a febrile paroxysm commonly precedes the disease.

The proximate cause of inflammation and fever is frequently the same, both formed by the *vis medicatrix naturæ* excited by the spasm or resistance on the surface either of a particular part, or of the whole body.

The increased heat, redness and action of the vessels, and the effusion into the surrounding parts, evidently prove an accelerated circulation and a pervious state of

the vessels. The phenomena of blisters, and the effects of direct stimulants, clearly point out that obstruction is not the cause of inflammation. The idea of *lentor* and *error loci* taking place in inflammation is ill grounded, inflamed blood being thinner than other blood, and coagulating with more difficulty.

The remote causes of inflammation are,

1. External stimulants.
2. Mechanical violence.
3. Cold applied under certain circumstances.
4. The peculiar action of contagion.

Inflammation terminates in *resolution*, *suppuration*, *gangrene*, or *effusion*, sometimes of red blood, and frequently of gluten, producing adhesions especially of membranous parts.

Inflammation is said to terminate by *resolution*, when the symptoms gradually abate, the texture and organization of the part remain entire, and the fluids effused under the moderate action of vessels are absorbed and received into the habit.

Suppuration takes place when the action of the vessels of the part, and the inflammatory diathesis continuing violent, the effusion and accumulation of gluten become considerable, especially in yielding cellular membrane, and the vessels acquire a power of secreting pus, or the effused fluid by stagnation undergoes a change affecting the surrounding parts, and producing a cavity for itself, frequently bounded by adhesions; this cavity is called an abscess.

The symptoms of *suppuration* are, first, an encrease of tumor and pain, a sense of weight and throbbing in the organ, the tumor becoming more soft and pointed; in

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cases of inflammation, accompanied with *inflammatory diathesis*, repeated and alternate chilliness, frequently attended with severe rigors, are perceived; the pain abates, and in parts subjected to our view a sense of fluctuation is felt.

Pus is seldom formed in internal parts, and again absorbed into the habit without symptoms of *hectic fever*, which are a quickness of the pulse; intense heat; an emaciated habit; irregular and returning rigors, and a great tendency to colliquative sweats.

The symptoms of *hectic fever* should be carefully marked and distinguished from those of *intermittent*.

The character of an *abscess*, and its disposition to heal, or become phagedenic, will depend much on the state of the fluid effused, and the degree of action in the vessels of the part.

In the case of *gangrene*, the matter effused becomes putrid, communicating its poisonous and destructive effects to the integuments and cellular membrane; sometimes, as in *spbacelus*, destroying blood-vessels and muscles. The symptoms of *gangrene* are, a sudden loss of pain and heat, after violent action of the part; a softness and loss of elasticity; vesicles on the surface of the part, containing an ichorous and offensive fluid; a livid or black appearance, with a cadaverous smell, a quick pulse, and a diminution of strength.

It has been usual to consider *scirrhus* as one effect of inflammation, though I believe it may exist independent of it, and seems to be an indolent tumour of a gland,

which from its structure has favoured the stagnation of a fluid in it.

In inflammation of the lungs, blood is often *effused* into their cells, and produces a sense of suffocation, and sometimes immediate death.

In the inflammation of membranous parts, as the pleura and peritoneum, there is frequently produced adhesions through the medium of coagulable lymph; and it is not uncommon to find pus effused from the surface of membranes, and collected in internal cavities, accompanied with frequent rigors, and the usual symptoms of *hectic fever*, without any appearance of ulceration or abscess on dissection.

OF THE GENERAL CURE OF INFLAMMATION.

In the first stage of inflammation, the cure should be attempted by promoting *resolution*, which is effected by,

1. Removing such remote causes, as are obvious, and continue to operate.

2. By diminishing the quantity of blood either in the whole system, or as directed to a peculiar organ.

3. By relaxing the whole system, or diminishing the tone of a particular part.

4. By increasing the neighbouring secretions.

All these latter indications are fulfilled by blood letting, either general or topical.

By the use of purgatives, especially the cooling and antiphlogistic.

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By relaxing the skin by antimonials and tepid diluents.

By fomentations, or the vapour bath, directed on the parts affected.

The violent action of the vessels of an inflamed part may be diminished by external sedatives; such as the preparations of lead, zinc, copper, and mercury, when applied in a very diluted state.

Resolution is frequently promoted by blisters, rubefacients, or other means of exciting greater action on the vessels in the neighbourhood of the inflamed part.

There are many cases of inflammation depending on the relaxed, weakened, and passive state of the organ, best removed by tonic remedies, and more active preparations of the metallic bodies. There are likewise cases of inflammation, kept up by the action of a peculiar acrimony, best cured by alterative remedies; such as the preparations of mercury and antimony. Of the first kind are chronic and scrophulous *ophthalmia*. Of the second are inflammations depending on a venereal cause, and affections of the skin, not accompanied with any inflammatory diathesis in the general habit.

In circumstances where *suppuration* is unavoidable, and probably in some it may be desirable, it becomes necessary to hasten the process, and to soften the integuments and surrounding parts, so as to promote the most favourable direction of the purulent matter.

The means employed to promote resolution are to be omitted on the one hand, while we should, on the other, guard against exciting too much the inflammatory diathesis of the habit.

Suppuration is best promoted by the application of warm cataplasms and plaisters, which by softening the

integuments, and keeping the part moist, promote the general view in suppuration.

The proper period for the evacuation of the pus, and the most eligible means of doing it, are considerations which belong to the surgeon.

In cases of abscess, pus is frequently improved and corrected by good air, a milk diet, the use of bark, and other tonics. In many cases of relaxation and diminished inflammation, external stimulants and escharotics are often applied with advantage, especially the preparations of mercury and copper.

Pus is likewise corrected by means which diminish pain and irritation; hence arises the use of opium, cicuta, and perhaps many others of the sedative class of remedies.

Inflammation frequently shews a tendency to *gangrene*, which should be discouraged by every proper means.

Gangrene, in its early stage, may be obviated by diminishing the inflammatory diathesis as directed above.

When it has already come on, every possible means should be used to prevent its spreading, by exciting a suppuratory inflammation in the neighbouring parts.

The internal use of bark in *gangrene* with *atonia*, should be freely employed; warm and antiseptic fomentations and cataplasms may be directed with advantage.

Opium has lately been recommended as a specific, in a particular species of *gangrene*.

In cases of *scirrhus*, the cure may be attempted by small doses of the neutral salts, sea-water, and alkaline remedies. In some cases *cicuta*, mercury, and antimony, promote the resolution of *scirrhus*.

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it should be extirpated by the knife, or destroyed by caustics.

The electric fluid has been of late successfully directed, in discussing hard and indolent tumours.

The pain and irritation of a cancer may be greatly relieved by opiates and cicuta, which, together with bark and mercury, frequently correct the nature of the discharge; to which may be added a milk and vegetable diet.

The external application of carrots, and other fermentable cataplasms, remove the offensive factor of the discharge.

Arsenic and other caustics destroy the inequalities and fungous appearances on the surface.

The early use of the knife, where it can be safely employed, should be preferred, before the habit has suffered much from the symptomatic hectic.

In cases of purulent effusion on internal parts, accompanied with the symptoms of hectic fever, above related, myrrh, in small doses, has been found useful. Sarsaparilla and a milk diet, correct the stimulus and acrimony of pus.

It seems probable that caustics, or setons in the integuments, diminish effusion, and relieve the sense of weight and congestion on internal organs.

OF PHRENITIS.

This is an inflammation of the brain or its membranes, attended with an acute fever, much head-ach, and early delirium.

It is either idiopathic, or symptomatic; the former seldom occurs in this country; but frequently in warm climates, in persons much exposed to the heat of the sun.

It begins with rigors, succeeded by heat; pain in the head; great pulsation of the arteries; inflamed eyes; disturbed sleep; *tinnitus aurium*; great irritability; dry tongue; delirium with fury, terminating in stupor and insensibility.

Symptomatic phrenitis has been described on the subject of fever.

The method of cure is in both the same.

OF OPHTHALMIA.

This is an inflammation of the membranes of the eye, more especially the *tunica conjunctiva*, or *adnata*.

It differs much in its degree of violence being sometimes more deeply seated, affecting the interior membranes, extending itself to the inner surface of the *palpebrae*, and is attended with more or less pain and fever.

In some there is much heat and dryness, in others an increase in the secretion of tears, which are of an acrid nature.

In some it is epidemical, in others intermittent.

It is frequently complicated with scrophulous or venereal complaints.

Its more remote causes are,

1. External stimulants, acrid and volatile *effluvia*.
2. Exposure to cold obstructing habitual evacuations.
3. Scrophulous and venereal causes determining to the eye.

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this may not be attributed to
symptomatic phrenitis. -

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It is accompanied with a sense of heat and pain, redness, and some degree of tumour; in general an increased discharge of an acrid, serous fluid, together with a *fordes*, which glues up the eyes, especially in the morning. The eye-sight is imperfect, and the pain is much increased by light. In some, suppuration comes on, in others, an opacity of the cornea.

The disease is frequently independent of general inflammatory diathesis, in others it is preceded and accompanied with the usual symptoms of inflammatory fever.

The cure consists in reducing the inflammatory diathesis, by bleeding and purging, and in diminishing the pain and irritability by local applications. In relaxed and scrophulous habits, deobstruent and tonic remedies are the best; and in the venereal ophthalmia, the cure can only be effected by mercurial and alterative medicines.

If there be no general fever, topical bleedings either by leeches, cupping-glasses, or by opening the temporal artery, answer best.

Blisters, applied to the head or behind the ears, often relieve. Setons, especially in the neighbourhood of the head, do good.

In some cases the inflammation has been diminished by slight scarifications of the turgid vessels of the eye.—Vide *Formul. Select.* No. 152, 199, 200.

In some cases of ophthalmia without fever, advantage is derived from the simple application of brandy and water.

In general, warm applications are improper.—Vide *Formul. Select.* No. 148.

In cases of scrophulous ophthalmia, a decoction of bark in lime water may be recommended.

In the venereal ophthalmia the *Hydrarg. Muriat.* is the best preparation of mercury.

OF THE INFLAMMATORY ANGINA.

In general it is preceded by chilliness, and a sense of languor, succeeded by heat; during the hot fit, inflammation is formed on the pharynx, tonsils, uvula, and velum pendulum palati; a difficulty and pain in deglutition; a fulness in the countenance; head-ach; white tongue; costiveness; full hard pulse, and inflamed blood. As the inflammation advances, there is more tumor; shooting pains through the ear; some appearance of external tumor in the neck; a sense of throbbing in the arteries of the head; matter is formed; an abscess breaks, and affords relief.

There is generally a great secretion of mucus from the parts, the adhesion of which on their surface has been confounded with the ulcerated state of the organ.

The remote and proximate causes of this disease are such as have been enumerated on the general subject of inflammation.

There is seldom danger, except where the head, by any sudden translation of the disorder, is much affected, or symptoms of peripneumony may have come on. The cure consists in reducing the inflammatory *diathesis*, by bleeding, either general, or topical, according to circumstances, and by the use of saline purgatives.—Vide *Formul. Select.* No. 173, 174.

In cases of external tumour, fomentations, poultices, and blisters may be applied to the parts.

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The steam of warm water received into the throat will promote the resolution of the disease.

Nitre, and the neutral salts, are the best cooling medicines.

Care should be taken that the inflamed parts are not put into too violent an action, by the frequent use of gargles.—Vide *Formul. Select.* No. 1.

OF THE MALIGNANT ANGINA.

It begins with chilliness, preceded by an intense burning heat, *vertigo*, pain in the head, and stiffness of the neck; there comes on a sense of uneasiness in the throat, nausea, vomiting, and sometimes diarrhoea, anxiety, restlessness, watery inflamed eyes, great debility, fainting on sitting in an erect posture, a foul tongue, an erysipelatous redness on the skin, a low quick pulse, early delirium, a discharge of an excoriating, foetid, and ichorous fluid from the tonsils and nose, sometimes destroying and eroding the neighbouring parts. There is always an exacerbation of fever towards night.

This disease seizes the weak and relaxed more generally; children and women therefore are the most frequent subjects of it.

It is communicated by contagion, and rages with much violence at all seasons of the year.

It should be distinguished both from the inflammatory angina, and from a particular species of epidemic sore throat, which has lately appeared in this country, attended with much pain and difficulty of deglutition, vio-

lent head-ach, with inflamed eyes, sometimes an universal redness and eruption on the skin resembling the measles; it has been falsely confounded with the malignant and gangrenous sore throat; it has some slight excoriation on the tonsils and velum pendulum palati, and has only given way to bleeding and purging with tartarised antimony and infusion of senna.—Vide *Formul. Select.* No. 173.

In the cure of the malignant angina, all violent evacuations should be avoided. The patient generally sinks under bleeding.

An emetic of ipecacuanha in the beginning affords relief.

Diarrhoea may be moderated by *Formul. Select.* No. 124.

A diaphoresis may be brought on by *Formul. Select.* No. 19.

In cases of evident remission of the disease, the bark should be employed with freedom.

The following antiseptic gargles are well adapted to promote the separation of the gangrenous parts in the throat, and the subsequent healing of the ulcers.—Vide *Formul. Select.* No. 71, 81.

If the tonsils are much swelled, blisters, applied behind the ears, or round the throat, give relief.

ANGINA TRACHEALIS.

The inflammation in this disease is not obvious on looking into the throat; it affects the larynx, and upper part of the trachea; it is accompanied with an acute fever and considerable pain; the breathing is very diffi-

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cult and laborious; the deglutition is but little impaired; there is a ringing noise as if the sound issued through metallic pipes; great anxiety and oppression, and the patient is carried off by suffocation.

This disease rages among children, and has been called the *croup*. Dissection has ascertained its seat, and proves that it is an inflammation of the trachea, frequently productive of an effusion of coagulable lymph, exhibiting the appearance of an adventitious membrane. It has been often mistaken for a spasmodic disease, and treated, though unsuccessfully, by antispasmodics. This disease is very rapid in its progress, and frequently fatal. It should be treated, as the inflammatory angina, especially, in the beginning in which stage only it is curable.

OF INFLAMMATION IN THE CAVITY OF THE THORAX.

I. Of Peripneumony and Pleurisy.

There is little foundation for distinguishing between the peripneumony and pleurisy, being affections of the same parts, arising from the same causes, and requiring the same method of cure, therefore they are both considered in this place.

They may be defined an acute fever, accompanied with difficult and painful respiration; frequent cough, and a sense of weight or pain in the cavity of the chest, especially during inspiration. It generally begins with a sense of coldness, succeeded by heat; a quick pulse, sometimes soft, particularly if the *parenchymatous* sub-

stance of the lungs be affected, at other times hard and strong, when the pleura is more especially the seat of the disease; anxiety; restlessness; inflamed blood; high coloured urine; flushed countenance; a difficulty in lying on either side; a dry cough, attended with an increase of pain; shooting lancinating pains through the chest, as high as the scapulæ and between the shoulders. In the advanced and dangerous state of the disease the pulse becomes irregular; the breathing is more difficult; cold extremities and partial sweats come on, with delirium and death.

This disease terminates by resolution; in which case an easy expectoration comes on, sometimes a whitish mucus streaked with blood; in some cases the resolution is effected by hæmorrhage from the nose; by gentle sweating, or a copious sediment in the urine.

Nature sometimes, by exciting externally, phlegmonic or erysipelatous inflammation, relieves the internal parts.

The most fatal termination is by the effusion of blood into the cells of the lungs, producing immediate suffocation.

It terminates also in the effusion of matter, sometimes producing inflammatory adhesion, sometimes abscesses, laying the foundation of *phthisis pulmonalis* and *hectic fever*.

The danger is derived from the degree of difficulty in breathing, of fever, and cough, especially continuing beyond the fourteenth day without symptoms of expectoration and resolution.

This disease generally seizes the vigorous and plethoric, or such as have weak lungs; the most frequent

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occasional causes are cold and moisture, or violent exertions of the organs of voice.

Symptoms of suppuration, bloody effusion or gangrene, should be attended to.

The indications of cure are best promoted by early and large bleedings, either general or topical, in some cases even to *syncope*; by ascendent and cooling diluents, such as nitre and the neutral salts; by gentle expectorants, at first the more relaxing ones, afterwards the more powerful and stimulating ones; by the application of blisters, and by moderating the cough by sedatives and opiates. Vide *Formul. Select.* No. 19, 23, 126, 138, 139, 146, 147, 172, 181.

In some cases expectoration is promoted by inhaling the steam of warm water and vinegar.

The antiphlogistic regimen, a milk and vegetable diet, with good air, should be recommended.

The symptoms may vary according to the seat of inflammation in the cavity of the thorax, as affecting either the mediastinum, the heart, or diaphragm, but the method of cure is the same as in peripneumony and pleurisy.

OF PHTHISIS PULMONALIS.

It is attended with a cough, quick pulse, difficult and painful respiration, and terminates in a purulent spitting from ulcers in the lungs, with colliquative evacuations.

It is first introduced by a dry obstinate cough; weight and oppression on the chest; and a tendency to an increased secretion of *mucus* in the morning.

The fever is irregular, always encreased by eating, especially animal food, accompanied with flushings in the face, an increased sense of heat in the hands and feet, watchfulness, profuse sweating towards the morning, which often alternates with diarrhœa. The tongue is often morbidly clean; there is a pale whiteness in the tunica conjunctiva of the eye; a gradual decay of strength and flesh; a difficulty of lying sometimes on the affected side, at other times on the opposite side. In some cases there is but little expectoration in the course of the disease; in others there is little or no pain to be perceived; the appetite frequently continues good to the last stage.

The violence of coughing, and a sense of irritation in the larynx, produces vomiting, especially after eating.

This is one of the most frequent disorders in this country, and should be early attended to, otherwise supuration will take place and consume the substance of the lungs. Suppuration is to be suspected when the patient complains of irregular chilly paroxysms, succeeded by heat, and attended with a flushing in the face, with a disposition to night sweats. Such cold fits have often been mistaken for intermittent fever, and fatally treated by bark and other means calculated for the cure of agues.

This disease is often hereditary, connected with a sanguineous and scrophulous temperament; it depends likewise on the mal-conformation of the chest; it frequently arises from an imprudent exposure to cold air, especially when applied to a heated body, and in a stream to the neck and chest.

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Violent exertions of the organs of voice, or the introduction of stimulants and acrid substances by the air in breathing, may bring on inflammation.

Persons are more particularly subject to consumptive complaints from the age of eighteen to thirty.

This disease is more rapid in some constitutions than in others; the scrophulous phthisis is generally more gradual in its effects, its symptoms abate in the winter, return with more violence in the spring, and it does not in general carry off the patient in less than three or four years.

In cases of hæmoptoe, with much fever, the progress is more rapid.

The danger is to be estimated from the degree of fever, and disposition to colliquative discharges.

In the last stage the feet and legs become œdematous, some degree of stupor and delirium comes on; but in general the senses remain entire to the end of the disease, and the mind is confident of recovery.

Phthisis arising from tubercles is more dangerous than that from hæmoptoe, and is strongly marked by an hereditary temperament.

Persons frequently recover from a *vomica* formed during peripneumony; and consumptive complaints have been sometimes removed by mania.

Pregnancy frequently retards the progress of consumption, which, however, often returns with additional violence after delivery.

Phthisis pulmonalis is to be considered as proving fatal, from a symptomatic hectic induced by ulcerated lungs.

OF THE CURE OF PHTHISIS PULMONALIS.

In general this will depend on the proper use of the antiphlogistic regimen, as the most effectual means of obviating suppuration; but it will vary somewhat as the disease has been preceded,

1. By hæmoptoe.
2. By peripneumony.
3. By catarrh.
4. By asthma.
5. By scrophulous tubercles.
6. By the determination of eruptive disorders on the lungs.
7. By a venereal or scorbutic habit.
8. By extraneous matter introduced, to which some artificers are subject.

The cure of this disease is extremely difficult, therefore the approach of it should be carefully watched, before it proceeds to a state of suppuration, especially in hereditary habits.

In all cases of hæmoptoe, more especially when depending on a powerful predisposition, a suppuration is to be dreaded, and is best prevented by large and repeated bleedings, the coolest and most ascetic regimen; avoiding exercise of body, and the keeping the belly soluble by the gentlest laxatives.—*Vide Formul. Select. No. 174.*

The dangerous effects of a catarrhus cough are best prevented by attending to the degree of inflammatory diathesis which accompanies it, by the use of Mudge's Inhaler, and by moderating the cough by mild opiates. *Vide Formul. Select. No. 141, 146.*

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In phthisis subsequent on peripneumony, the antiphlogistic regimen, a sea voyage, and a temperate atmosphere, with moderate exercise, should be recommended.

In all consumptive complaints, small and repeated bleedings, suited to the strength of the patient, and the degree of inflammation, should be attended to.

Suppuration is often prevented by setons, issues, or open blisters on the chest.

The external parts should be well defended from the cold air, by wearing flannel next the skin.

Vegetable acids, and fruits of all kinds, should be used with freedom; they seldom increase any colliquative diarrhoea.

In the inflammatory stage of tubercles, their suppuration should be avoided by the means employed above; yet they are sometimes in a more indolent state, when their resolution has been effected by small doses of mercury and cicuta: in the *tabes mesenterica* of children, which is a similar disease, though the affection of a different organ, I have experienced good effects from such a combination.—Vide *Formul. Select.* No. 105.

In cases of hectic, accompanied with early debility, and little apparent inflammation, I have experienced good effects from myrrh, particularly as recommended by Dr. Griffith.—Vide *Formul. Select.* No. 132.

In no cases have I seen any good effects from the use of bark.

A strong decoction of sarsaparilla, or the powder in substance, will frequently diminish the exacerbation of hectic fever.

The common drink may be either Seltzer or Bristol water, or common whey.

Oily and demulcent remedies seldom afford any permanent relief, the former clog the stomach, and encrease the fever.—Vide *Formul. Select.* No. 126, 181.

In general it is proper to quiet the cough by opiates.

Colliquative sweats may be moderated by the Vitriolic Acid.—Vide *Formul. Select.* No. 3, 4. And the diarrhoea by No. 58, 124.

OF INFLAMMATION OF THE STOMACH.

The symptoms are, an acute pain in the region of the stomach; a sense of internal heat in the part; quick, hard contracted pulse; great anxiety and watchfulness; violent vomiting, especially after taking any thing into the stomach; much thirst, with great prostration of strength; hiccup; delirium; cold extremities, and death.

This disease may be brought on by the sudden application of cold, the repulsion of eruptions, the translocation of gout and other disorders, the operation of caustic and metallic poisons; by taking in cold drink while the body is warm, and by a large quantity of indigestible food.

Its fatal termination is in gangrene.

It is to be treated in the same manner as inflammation of other parts,

1. By large and repeated bleedings.
2. By blisters and fomentations.
3. By mild and demulcent laxatives.
4. By mucilaginous and oily diluents.
5. By remedies which may decompose the acrid and caustic preparations of metals.

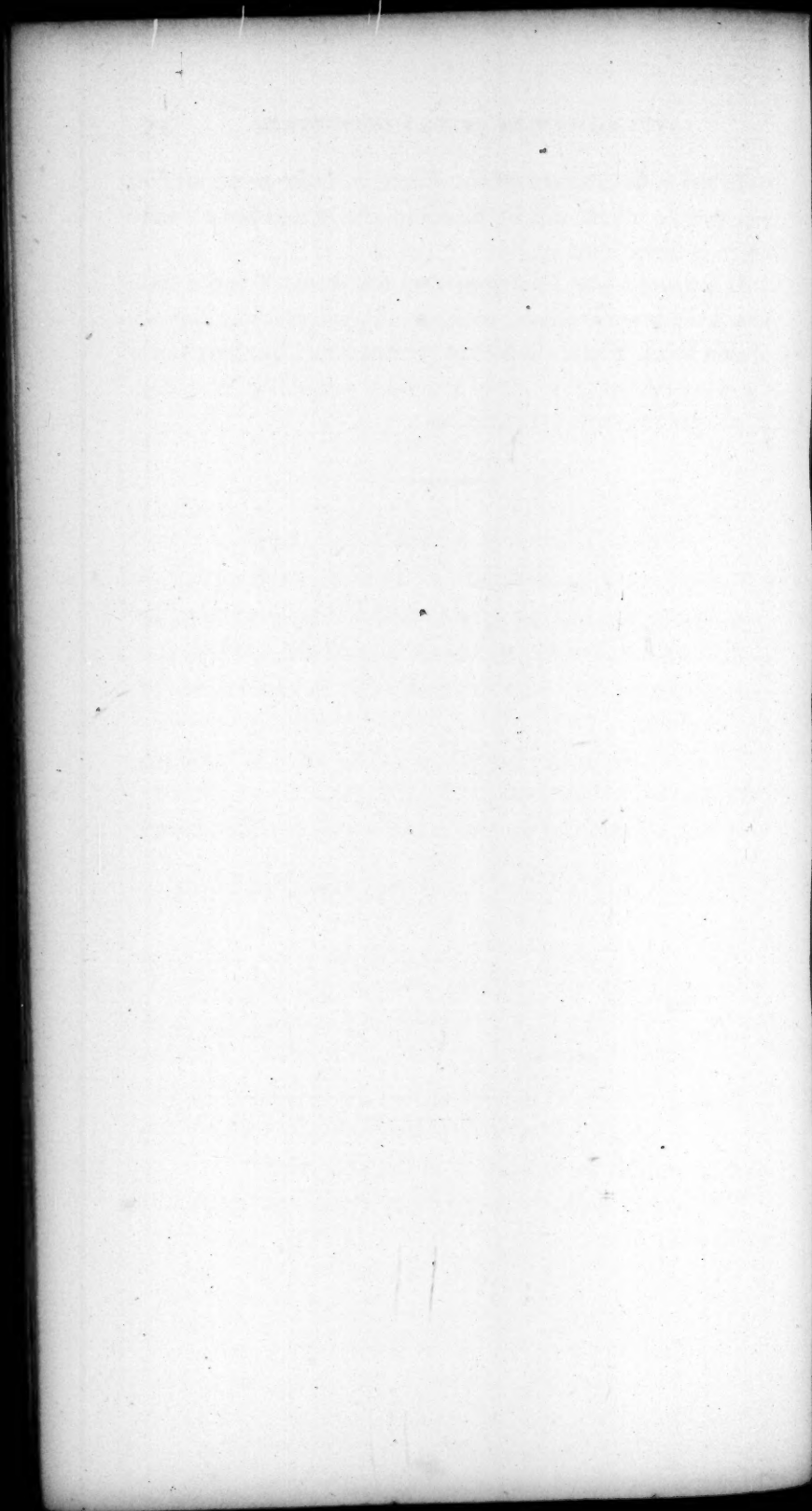
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In the inflammation of the stomach, little or no medicine can be taken, till by bleeding the irritability of the organ is diminished.

It appears from dissection, that the stomach and intestines have been inflamed without any remarkable degree of pain being perceived by the patient: this has suggested the idea of different kinds of inflammation of the stomach, as phlegmonic and erysipelatous.

OF INFLAMMATION OF THE INTESTINES.

In the inflammation of the bowels there is a fixed pain in the abdomen, attended with fever, costiveness, and vomiting; the pain is chiefly felt in the region of the umbilicus.

This disease arises from the same causes as produce inflammation of the stomach.

It may be induced by cholic, volvulus, or incarcerated hernia.

It terminates either by resolution, effusion of pus, or gangrene.

To the plan of cure recommended in inflammation of the stomach may be added the use of mild purgatives, in preference to the more drastic and less bulky ones. Vide *Formul. Select.* No. 122.

During the use of purgatives, it may be proper to give an opiate occasionally, which diminishes irritation, and often promotes the operation of the purgative.

The warm bath, with glysters, should be frequently employed.

In cases of volvulus and hernia, glysters of tobacco have been frequently had recourse to.

OF INFLAMMATION OF THE LIVER.

It may be distinguished either as affecting the substance of the liver, or the peritoneum which covers it.

The symptoms likewise vary according to the seat of the inflammation, either as affecting the concave and inferior part, or the more convex and superior.

The inflammation of the concave part of the liver is distinguished by the following symptoms :

An obtuse sense of pain and weight in the right *hypochondrium*; much heat, and anxiety at the *præcordia*; the pulse at first slow, afterwards more quick; a sense of fulness and tension in the region of the liver; a loathing of food; sickness and vomiting; thirst; dry rough tongue, becoming black; a pale sunk countenance, frequently of a yellow colour; troublesome hiccup.

In the inflammation of the superior and convex part of the liver, the pain is more acute, attended with difficult and painful respiration; the pain extends high in the cavity of the thorax, affecting the clavicle, and resembling pleurisy; there is generally some degree of cough, and the patient cannot lie on the left side.

In both cases there is great debility, and in general the disease is preceded by rigor.

This disease terminates on the fourth, seventh, or eleventh day, and the resolution is accompanied either with a critical diarrhœa, sweat, or a copious sediment in

P. L. Liver close connection with
mind, tho' sparingly furnished
with nerves - acts upon mind &
is acted upon by mind more than
any other gland. -

Infl. of liver not extending over other
glands but confined to a part.
In active infl. commonly preceded
by that of peritoneal coat -

Sp. ^{al} liquors first disease the stomach
& afterwards the liver - These
liquors in "divided doses" - not
so much when taken so as
to make decidedly drunk.

Anxiety of mind also occa-
sions this disease, & relief of
mind cures. - This is one of
most common of chronic
diseases. -

the urine. If the inflammation does not abate, it terminates in suppuration.

The liver is subject to a more chronic inflammation, which terminates in scirrhus.

The remote causes of this inflammation are sometimes a præternatural enlargement of the omentum; the violent operation of emetics; sudden application of cold after the body has been heated; the irritation of acrid bile, or biliary concretions.

It is a very common disease in warm climates, particularly in the East-Indies, and it frequently terminates either in suppuration or scirrhus.

An early and judicious treatment renders it a less dangerous disease, than the inflammation of other internal organs.

A violent and continued hiccup, much fever, great thirst, a paleness and coldness of the extremities, while the other parts of the body are intensely hot, are the most fatal symptoms.

The liver frequently suppurates, the abscess sometimes pointing outwards; at other times pus is discharged by stool; in general the body gradually wastes under the common symptoms of hectic, with frequent rigors and colliquative sweats.

The liver may remain in a scirrhus state for a long time without much inconvenience, especially if attention be paid to regimen; it however ultimately brings on symptoms of jaundice and dropsy, which seldom give way to medicine.

The *cure* of this disease consists,

1. In early and liberal bleeding.
2. In saline and antiphlogistic purgatives.

3. Fomentations and clysters frequently repeated.
4. Application of blisters to the region of the liver.
5. In the use of attenuating and deobstruent remedies, particularly mercury, after evacuations have been employed.

The body should be kept in an easy posture; every thing which may heat, and excite fever should be avoided.

In the scirrhus state of the organ, mercury with cicuta has been found serviceable.—Vide *Formul. Select.* No. 105.

OF INFLAMMATION OF THE KIDNEY.

The symptoms are, a sense of heat, pain, and sometimes tumour and redness in the region of the kidney; a numbness of the leg and thigh of the affected side; the urine high coloured, and in small quantity, accompanied with pain, difficulty in discharging it. The patient in general can lie more easily on the diseased than on the opposite side.

There is generally nausea and vomiting, with much febrile heat and anxiety.

The disease is frequently preceded by a cold fit, terminating, as in other cases of inflammation, in intense heat.

The kidney is subject to suppuration and gangrene.

Delirium, with pale urine, or an obstruction to its secretion, are fatal symptoms. The piles frequently relieve the patient. Pus is frequently discharged by urine, and is the most natural outlet in cases of suppuration; at other times it is effused into the cavity of the abdomen, and is productive of hectic symptoms.

Dr L. considers calomel as having
a specific power over the disease -
namely - as does over the secretion.
Cal: is slow, but carries all be-
fore it - follows it by an-
other perspiration in a few
hours, when not used as an
alterative.

Must only when vital organs
affected - for cannot combat
power for it.

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The causes of this disease are wounds, contusions, or calculi in the organ; violent exertions in attempting to carry great weights; concussions of the body, by violent exercise either on horseback, or in rough carriages; the suppression of hæmorrhoids, menses, or other habitual evacuations.

The cure is best effected by,

1. Bleeding, and the application of leeches to the hæmorrhoidal vessels.
2. Emollient clysters and fomentations.
3. Mucilaginous and aqueous diluents, whey, &c.
4. By avoiding diuretics, and every medicine which has any direct tendency to stimulate and inflame the urinary passages; hence blisters are not admissible in this disease.—Vide *Formul. Select.* No. 127, 128.

OF STRANGURY.

A strangury is a difficult and painful discharge of urine, with a constant tenesmus.

It may be distinguished into the acute, as depending on inflammation; or chronic, as independent of it.

In strangury, the urine is discharged by drops, with a continual desire to empty the bladder; the stimulus quickly returns, and becomes intolerable.

With inflammation there is frequently fever, with much heat, and a great tension in the abdomen, pain in the region of the bladder, anxiety at the præcordia, and vomiting.

The causes of strangury are many:

1. The internal use of cantharides, camphor, turpentine, or other stimulating diuretics.
2. Inflammation of the bladder, sometimes, though seldom, terminating in suppuration.
3. Hæmorrhoidal tumours.
4. Polypi in the bladder.
5. Gouty irritation.
6. Calculous concretions.
7. Obstructions in the urethra.

In the case of strangury from the presence of *calculus*, there is little or no fever, great pain in the extremity of the penis, with an increased secretion of mucus in the urine; the only infallible test, however, is its discovery by the proper instrument introduced for that purpose.

When it arises from obstructions in the course of the urethra, from the sensation which such strictures produce, the patient frequently supposes the disease to seated in the neck of the bladder.

In the case of inflammation, the cure is to be effected by bleeding, gentle laxatives, oily clysters and fomentations, mucilaginous and aqueous diluents.

The paralysis of the substance of the bladder occasions a difficulty of making urine, while a palsy of the sphincter of the bladder occasions an incontinency of urine.

In the former case, the urine must be frequently drawn off by the catheter, and stimulating clysters be frequently injected.

The chalybeate and tonic plan of cure generally succeeds.

In cases of incontinence of urine, to which persons advanced in life are extremely subject, the application

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Dr Babington's letter. -

of blisters to the os sacrum, and the internal use of cantharides, have been successfully recommended.

OF RHEUMATISM.

This disease is distinguished into the acute, and chronic, the former accompanied with fever and inflammation, the latter with little or none.

The symptoms of the acute rheumatism are lassitude; rigor; a sense of weight and coldness in the extremities; a quick pulse; thirst; great restlessness, and obstinate costiveness. The tongue is generally very foul, and covered with a white mucus. In a day or two after the attack, an acute pain is felt in one or more joints of the body, which is soon followed by tumour and inflammation; the pain and tumour are very moveable to other joints; the urine is very high coloured, and frequently deposits a sediment; the pulse is generally very strong and quick, and there is sometimes a disposition to profuse sweating, which seldom affords the least relief.

There are transitory and acute pains in the chest, and muscles of the body, with symptoms of cough and catarrh.

The acute rheumatism is not a disease which proves frequently fatal, but it leaves the body extremely weak, very irritable, and much disposed to a relapse.

It has no regular period of termination; it sometimes is protracted to several weeks, though it shews an early tendency to remission.

The chronic rheumatism is not so much of the inflammatory nature, and is marked chiefly by irregular and

immoveable pains in different muscles of the body, often affecting their tendinous aponeurosis and ligaments, without tumour or inflammation; such pains are greatly influenced by the state of the weather.

The rheumatism seldom occurs in warm climates; in this country it generally prevails in spring and autumn.

The most frequent occasional cause is the sudden application of cold to the heated body, especially if at rest; it operates more powerfully when attended with moisture, and when applied to the body with less than its usual covering.

It is a disease which attacks every age, but more especially those of a plethoric habit, who indulge much in animal food, and lead an inactive life.

The inflammation is chiefly seated in the vessels running on ligaments and the aponeurosis of muscles, and extending afterwards to the cutaneous vessels.

It seldom suppurates, but often terminates in a gelatinous effusion in ligamentous and tendinous parts, which produces a stiffness, and sometimes an ankylosis of the joints.

A sensible and gradual diminution of the fever and inflammatory symptoms is preceded either by a moderate increase of perspiration, a copious sediment in the urine, or a diarrhoea.

Sometimes a fatal translation of the disease from the external parts to the head, with delirium and pale urine, kills the patient.

In the acute rheumatism, the cure is to be attempted by,

1. Bleeding, either general or topical.
2. By diluents, nitre, and the other neutral salts.

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3. By uniting antimonial with purgative remedies.
4. By the use of bark in cases of remission.
5. By Guaiacum, and volatile medicines after evacuations have been employed.—*Vide Formul. Select.* No. 17, 29, 97, 98, 137.

In the chronic rheumatism, the cure should be conducted,

1. By warm and volatile remedies, either taken internally, or applied externally.
2. By external warmth, dry friction, and electricity.
3. By mercurial alteratives, joined to antimonial preparations.
4. By the temperate and warm bath, such as those of Buxton and Bath, preparatory to the use of sea bathing and the cold bath.

5. In many cases, blisters, stimulating plaisters, and even the actual cautery, or moxa, has been successfully employed.—*Vide Formul. Select.* No. 165.

There are many instances, as in the lumbago and sciatica, which are generally considered as chronic rheumatism, as not being attended with external appearance of inflammation, which give way chiefly to bleeding and purging, in preference to the warm and stimulating practice generally employed.

OF THE GOUT.

This disease is difficult to describe, though it chiefly shews itself by an affection of the joints, yet it often attacks internal parts, and assumes the most irregular and anomalous appearances.

It may be considered either as hereditary or acquired; or as being regular or irregular: it has likewise been distinguished as seated in different parts of the body, giving rise to the terms *podagra*, *chiragra*, *gonagra*, &c.

A paroxysm of the gout is generally preceded by lassitude, torpor, and dejection of spirits; loss of appetite, nausea, acidity, eructations, flatulency, costiveness, and other disorders of the *prima via*.

The paroxysm begins with a severe pain in the foot, generally in the great toe; a sense of coldness in the legs; some degree of *horripilatio* and fever.

The pain becomes more severe, affecting the tarsal and metatarsal bones; towards the morning the parts begin to swell and inflame; a gentle moisture on the foot comes on, and the fever and pain abate; the symptoms return again towards the evening; the mind is very irritable; the urine is high coloured, and deposits a sediment; the tongue is foul, and the body is costive. The more acute the paroxysm, the shorter in general its duration; it terminates usually with an itching of the parts, and a desquamation of the cuticle.

Though in young habits, and on the first attack of the disease, it is generally confined to the feet; yet in more violent and unfavourable cases it attacks the other joints of the body, leaving them extremely weak, with a disposition to the secretion of a chalky matter. In these cases the disease is protracted almost the whole year, and seldom leaves the patient entirely; the paroxysm is rarely critical and sufficient for relieving the system; the strength is gradually impaired, and the disease falls on internal organs, producing apoplexy, lethargy, palsy, asthma, and inflammatory affections of the stomach and other viscera, nausea, vomiting, diarrhoea, &c.

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This disease generally attacks men, seldom women, virgins or eunuchs; chiefly those of a sedentary and studious life, of a full and plethoric habit, and who have indulged much in the use of animal food, fermented liquors, and venery.

It is frequently hereditary, in which cases it occurs independently of any abuses in eating and drinking.

In constitutions naturally predisposed to it, it is invited by the application of cold to the feet; by fatigue or anxiety of mind; by repeated bleeding, as tending to weaken the body; by violent sprains; by oily and indigestible food.

From the fullest attention to the symptoms and remote causes of this disease, it would appear that plethora and debility joined, constitute its proximate cause, and to the removal of which, inflammatory action, especially in the extremities, are excited.

The more severe and painful the paroxysm is, the shorter is its duration, and the intermission is the longer.

A regular paroxysm of this disease contributes much to the cure of other disorders, and the restoration of the body to perfect health.

The disease is more easily cured in young persons than in old.

There is no effectual cure for hereditary gout, or in cases where the disease continues to attack indiscriminately every joint of the body, and to produce chalky concretions.

In conducting the cure of this disease, we should consider the means proper to be employed either in the intermission, or in the paroxysm; we should likewise attend to the remedies necessary to palliate symptoms.

In the intermission the digestive powers should be restored by the occasional use of tonic and chalybeate remedies, such as Bath water, &c. By keeping the body soluble; by using exercise; by the flesh-brush; by going to bed early, and rising soon in the morning; but above all, the moderate use of animal food and fermented liquors; and in some cases of inflammatory and hereditary gout, by a total abstinence from animal food and spirituous liquors, confining the diet to milk and vegetables.

During the paroxysm of a regular gout, little more is necessary than to moderate the fever and keep the belly soluble.

In the case of ineffectual efforts on the extremities, and where the internal parts are affected, the application of blisters, and warm opiates taken internally, will answer the desired purpose.—Vide *Formul. Select.* No. 143.

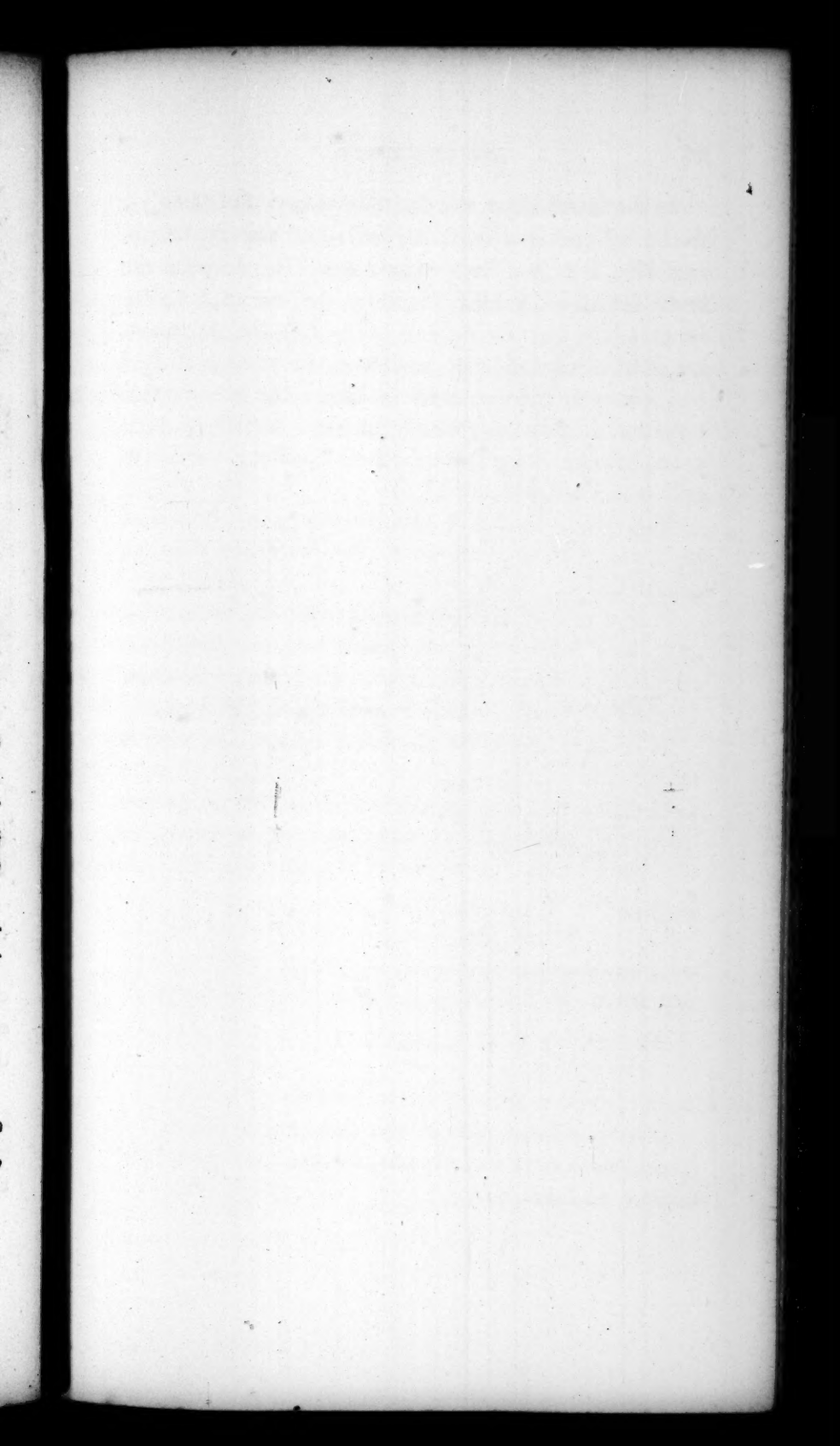
In violent cholic or diarrhoea, opiates and clysters answer best.

In nausea and vomiting, a gentle emetic of ipecacuanha, and afterwards an anodyne; warm cataplasms and plaisters to the region of the stomach, often do good.

In all cases of gout it is necessary to keep the surface of the body warm, but more especially the lower extremities, so as to keep up the cuticular discharge.

OF ERYSIPELAS.

It is an inflammation of the skin, much disposed to spread over a large surface, accompanied with pain, heat, tumour, and redness.



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It is generally preceded by a considerable degree of rigor, terminating in the hot fit of a fever, thirst, restlessness, frequent pulse, inflamed blood, prostration of strength, pain in the head, vomiting, delirium, and coma.

On the second, third, or fourth day, the skin becomes tense and tumid with redness and pain, and is frequently covered with pustules, containing a thin fluid, considerably elevated above the skin, after which the fever generally abates.

The tumour continues to spread, and often attacks the lower extremities, abdomen, and glandular parts of the body, but more frequently the face: there is often a general enlargement of the head, with stupor and delirium.

If the disease terminates favourably by resolution, the tumour gradually subsides, the pain and fever abate, the skin becomes of a yellow colour, and there is a disquamation of the cuticle.

If the disease terminates in suppuration, it is of a phagedenic and gangrenous kind, and seldom proves favourable.

The disease is sometimes contagious, and a morbid and malignant acrimony seems to be introduced into the habit.

The erysipelas is easily distinguished from phlegmon, by the effect of pressure, the disposition to cover a large surface, and the termination of suppuration not productive of healthy pus.

In more gentle attacks of this disease there is seldom danger, but in violent attacks, especially on the head, with delirium and coma, the danger is considerable; the

degree of danger in this disease may be in some measure ascertained from the state of the pulse, and the degree of the *vis vite*.

Erysipelas, repelled from the surface of the body, frequently induces internal inflammation, asthma, convulsions, and proves generally fatal.

The indications of cure are to moderate the fever, and to promote the necessary secretions; in many cases of malignant erysipelas, the *vis vite* must be supported, and every means employed to keep up the inflammation on the external parts.

The fever may be moderated by bleeding, according to the degree of strength in the patient, by diluents of the aqueous and demulcent kind, by gentle laxatives, and mild diaphoretics.—Vide *Formul. Select.* No. 19, 27, 122, 139.

The *vis vite* is supported by blisters applied to the extremities, or sometimes to the neighbourhood of the diseased part, and by warm and cordial medicines.

In cases of gangrene, with a sunk low pulse, the bark and serpentaria should be given freely.

In general, however, the disease, being of the inflammatory kind, may be greatly aggravated by a stimulating and cordial regimen.

The best application to the inflamed parts is the farina of oatmeal, and perhaps other farinaceous matter; all repelling and oily applications should be avoided.

In the cure of gangrene, the same means are recommended as mentioned in page 40.

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May 19. Smallpox - S Babington.

Period of eruption determines very much the prognosis - see Syll.
Swelling of the face considered favorable, as by Sydenham. - ~~Redden~~

Eruption first appears on face & this even dignostic of S. Prop.

The full & fainty crimson scintillated pustule most favorable. -

The flatness the reverse. Early ex-
piation favorable. In the confluent

and the dry crust forming on
skin more favorable than the

severe effusion & latities in some
cases taking place. In the

confluent the secondary fever

sometimes assumes the
character of malignant

fever, & requires the same
treatment. - But the sup.

true fever in some instances,

is so violent as to destroy before
the eruption takes place. -

Impossible to say with certainty
what temperament & what state
of the body will produce any
particular form of the disease.

Advised this a greater mortality
has taken place from this disease
since the introduction of immu-
nation - because many do not
immunize & are now more
exposed. - Practitioners regard
^{season} time & circumstances of the
patient as of little moment.
Yet when there is a choice
they should be attended to.
Children before dentition
are improper subjects. Unless
the patient has more a ^{febrile} ~~l~~
constitutional affection he

is not to be considered as securing
from the disease in future. -
Local appearances in this disease,
& ^{more} especially in the vaccine dis-
ease, are not to be considered
as securing the patient from
the ~~future~~ disease in future.

In the three or four first days
after inoculation the re-
moval or destruction of the
part prevents the consti-
tutional affection. -

Care - febrile attack day after
inoculation occasioned the dis-
ease to be confluent, as thinks
Dr B. - Dr Woodville prefers mat-
ter from the most confluent
form of the disease, as founded
on his experience. Dr B thinks
this not very important, & quantity

OF THE SMALL-POX.

This disease may be divided into four stages :

1. The primary fever.
2. The eruption.
3. The suppuration.
4. The secondary fever.

It generally commences with horripilatio, succeeded by heat and universal pain, more especially of the head, loins and throat; thirst; heat; restlessness; a quick hard pulse; nausea; vomiting; redness of the eyes, and drowsiness.

The patient frequently complains of a pain in the stomach, sometimes in the side, or the region of the kidney.

Adults have profuse sweating, and infants epileptic and convulsive fits.

This fever generally lasts for a few days before the eruption appears, and is usually of an inflammatory nature.

In the confluent small-pox the eruptions begin on the second or third day; in the distinct kind, on the third, fourth, or fifth day from the attack of the fever: it appears like flea-bites, first on the face and upper extremities, and afterwards on the trunk of the body and lower extremities; becoming inflamed, elevated above the skin, and painful. In the confluent small-pox the fever abates but little, on the appearance of the eruption; in the more distinct kind it frequently altogether disappears. About the sixth day after the eruption is completed, in the confluent small-pox, and sometimes even in the more

distinct, a salivation comes on; in infants there is frequently a diarrhœa.

The fauces become inflamed, painful, and attended with a difficult deglutition. About the seventh day the eye-lids swell, and are glued together, so that the patient is generally blind for a few days. The face generally swells, the basis of the pustules become red and inflamed; about the eighth day they tend to suppuration, which finishes the process of eruption.

The pustules are distended with pus; first on the face, afterwards on other parts of the body, in the order in which they appeared; the saliva becomes very tough and thick, the fauces become more inflamed, the skin is very painful, and the patient cannot sleep; the process of suppuration is generally finished about the tenth day.

The pustules then begin to dry, to turn yellow, first on the face and upper extremities, afterwards in the lower extremities. A secondary fever frequently comes on, especially in the confluent small-pox, with a hard full pulse, much thirst and anxiety, and symptoms often of peripneumony, or pleurisy; the inflammation on the face gradually subsides, the spitting is greatly diminished, the arms and hands are generally much swelled, which continues to increase until the tumour on the face, and the salivation entirely subside.

In the secondary fever, delirium, coma, and inflammation of some of the internal viscera often kill the patient; sometimes the viscidty of the saliva, the tumour of the fauces, and infarction of the nose threaten suffocation.

In general, the fate of the patient is determinable from the eleventh to the seventeenth day. The skin is covered over with a dry crust, which afterwards separates

quantity quite unimportant.
Dr Jenner has thought the ^{variety of} depth
of incision occasions variety of
disease - Dr B. imagines he has
given this up - B. thinks is de-
cidedly unimportant. -

- May 20. - Treatment.

Antiphlogistic method in far
the greater number of cases
necessary - and that according
to circumstances. But cases
no doubt occur in which
the cordial method of
treatment is necessary.
Exposure of patients to cold
has been carried too far
by some - Dr Woodville
authorizes this observation.

In case of determination of the diseased action upon fauces, an active emetic is perhaps the very best remedy. -

In case of convulsions in children warm bath often very suddenly relieves. -

The activity of the contagious matter of S. p. or of the volatility of it, may vary.

See Dr. Haygarth..

Vaccine Disease.

It appears that this fever from Smallpox as effectually as S. p. itself. - Long been known as a disease in Cows, & that those who milked the cows having it with hands 'cracked' in any way or wounded were

liable to be infected thereby.
long said among farmers
that is secured from the
influence of the venereal
contagion. But Dr Jenner
first ~~and~~ made accurate
experiments on the subject
I to him the world are
indebted. Dr B. has ex-
amined but found not
one person who had pro-
perly undergone the
varicell disease, who
afterwards could have
S. pox. — Question which
Disease best. To prove
by a few thousand instan-
ces now prove that this

is as secure & certainly not
more troublesome but less
so. - As yet only one
instance of death (Dr Wood-
ville's) & questionable
whether this from the
disease. - The patient has
local inflammation as
from I. per, & constitu-
tional indisposition
only one afternoon usu-
ally. - ~~Is~~ The conta-
gion of this disease not
to be communicated
except by inoculation
or contact. -

and leaves frequently a mark behind. The crisis of the secondary fever is either accompanied with a diarrhoea or sediment in the urine.

It is difficult to distinguish the febrile attack in this disease from many others, the pain in the stomach and drowsiness are the chief pathognomonic symptoms.

After the eruption appears, the regular succession of symptoms in the various stages of the pustule, renders the distinction easy. *usually.*

In the chicken-pox there is little fever, either preceding or accompanying the eruption; the pustule does not always begin in the face or upper extremities; it matures sooner, and disappears more early and suddenly. Like the natural small-pox it may be communicated by inoculation, which should be carefully attended to in the choice of variolous matter.

The small-pox are most favourable when the eruption is late and slow in its progress; the most malignant small-pox rage chiefly in the autumnal months, or beginning of winter.

The disease is generally milder in children than adults.

If the pain in the stomach or side be severe, it generally precedes the confluent small-pox.

The more confluent the disease, especially on the face, the more danger there is, particularly if the fever remains during and after the eruption is completed. Delirium after the eruption is bad; a sudden depression of the pustule, or swelling of the face, with a suppression of saliva, is unfavourable.

Much redness and inflammation about the basis of the pustule, is more favourable than paleness and flatness.

A whitish viscid pus distending the pustule is favour-

able as opposed to a brownish, thin, ichorous, and frequently bloody fluid.

Livid, flat pustules, with hæmorrhagy, prove immediately fatal.

Before the practice of inoculation, this disease used chiefly to appear in the spring and summer, more rarely in autumn, and generally subsided in winter.

Youth are the most susceptible of infection; fear and grief, by weakening the body, subject a person more readily to infection.

It only seizes a person once during life.

The occasional cause of the disease, is the introduction into the body of a poisonous ferment, which acts by assimilating the animal fluids into its own nature.

The variety in the disease already described, depends on the temperament and state of the body at the time of its application, and not on the nature of the variolous fluid.

The violence of the small-pox is greatly diminished by inoculation.

The advantages of this practice are chiefly the following :

1. The choice of the subject, the time of life, and season of the year.
2. The preparation by regimen and medicine.
3. The avoiding the usual occasional causes which aggravate the disease.
4. By the choice of the matter, and manner of applying it, and probably from its being then in the early period of infection.
5. The introduction of a very small quantity of the matter.

As to eruption Dr W. & Dr J. differ.
Dr B. thinks Dr W. himself leans
to the opinion that his patients
have been exposed to various
influences. - A Gentleman,
friend of Dr B's has mixed
the poisons - the inflam-
mation on the arm like
the vaccine - eruption
but not variolous -
I matter from there pro-
duced the vaccine with-
out eruption. - Dr B. thinks
some late experiments by Dr J.
support his first conjecture
as to the origin of the disease,
viz; that it is derived to Cows from
Horses. -

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6. The occasional use of purging after the inoculation.

7. Free exposure to cool air.

The practice of all these measures have tended greatly to moderate the disease.

The indications of cure in the small-pox are,

To moderate the primary fever, so as to produce a distinct, instead of a confluent eruption.

This is done by bleeding, in cases of violent action in a full and plethoric habit; by vomiting and purging, which should be attended to in almost every case on the accession of the disease; by the use of acids, and cooling diluents; and by keeping the body in cool air.

In every stage of the small-pox, animal food should be avoided.

In the convulsions of children which precede the eruption, an opiate is of great service.

If the fever should continue after the eruption, it may sometimes be necessary to bleed, but more generally proper to promote purging, and to encourage the application of cold air.

If loss of strength should supervene, with symptoms of putrefaction, a petechial appearance on the pustule, and other symptoms of debility, interrupting the process of suppuration, Peruvian bark with acids may be given with great advantage.—Vide *Formul. Select.* No. 67, 68.

Dr. Sydenham has recommended to give small beer, and the *spirit. ather. vitriol.* freely in cases of great malignancy, and in suppression of urine to take the patient out of bed and expose him to cold air.

In cases of pain, restlessness, and anxiety after the eruption, and through the whole course of the disease, an

opiate may be given with advantage, taking care to avoid its costive effects by soluble medicines.

In cases of great danger, either from debility, or the sudden translation of the external swelling, it is proper to apply blisters to different parts of the body; if the throat and fauces are particularly affected with a tough saliva or mucus, blisters to the throat may be used with advantage.

In the secondary fever, symptoms of inflammation frequently and suddenly come on, which require bleeding and purging.

In some cases symptoms of putrescency come on, which may require gentle purging, but more particularly give way to bark and acids.

In some cases, especially in infants, symptoms of suffocation and difficult breathing occur, which give way to nauseating and even emetic doses of antimonial remedies.

There is no disease in which artificially prepared pure air, (*Oxygen Gas* of the modern chemist) seems more applicable than this.

All anomalous appearances of small-pox are bad, under which are included the crystalline, filiquose, and verrucose, which are to be treated as the violent kinds above mentioned.

Infection is best prevented by attention to cleanliness, and avoiding every communication with the infected person, or those who have frequented the house, or come into contact with his clothes.

X & for circulation of air.

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May 21. Measles appeared about
the same time as Spox - in
the 6th Century. Disease &
method of treatment very like
that of Spox. Contagious matter
much more volatile than
that of Spox.

Dr Watson in London Med. Obs. & Enqui-
ries. -

OF THE MEASLES.

This disease has three stages :

1. Of contagion.
2. Of eruption.
3. Their change into a farinaceous state.

It begins with rigor, succeeded by heat, thirst, white tongue, head-ach, drowsiness, sneezing, cough, with symptoms of catarrh, watery inflamed eyes, sometimes sickness and vomiting.

About the fourth day there are seen small red spots, running together, and somewhat elevated above the skin; they appear first on the face and upper extremities, and afterwards on the trunk of the body and lower extremities.

The sickness or vomiting generally abates, but the cough and fever often continue, with difficult respiration and symptoms of peripneumony.

The patient frequently sweats profusely, and is seized with diarrhœa.

About the sixth day the pustules dry on the face, and afterwards on other parts of the body, and there is a disquamation of the cuticle.

About the ninth day they are not to be perceived, but the body is covered over with a kind of farina. The fever should abate about this time, but very often is accompanied with symptoms of peripneumony; a diarrhœa sometimes continues obstinate after the disease is over.

The symptoms are relieved either by hæmorrhagy, sweating, diarrhœa, or a sediment in the urine.

The disease arises from the application of a peculiar poison, which is more volatile and diffusive in air than that of the small-pox ; it principally affects the mucous membrane of the body.

The diagnosis is determined by a knowledge of the prevailing epidemic, sneezing, coughing, and the watery inflamed eyes, together with the eruption.

The disease is most dangerous when the eruption is slow : a gentle diarrhoea and a soft skin moderates the fever. The sudden disappearance of the eruption, with delirium and any livid appearance, threatens immediate death.

Much redness or paleness, prostration of strength, vomiting, restlessness, difficult breathing, or petechial spots announce much danger.

It generally rages from about the month of January, until the vernal equinox, and disappears in July.

It generally attacks children, and persons of weak and delicate habits.

The disease is most successfully treated, first, by bleeding, which relieves the cough, and peripneumonic symptoms ; a light vegetable diet, cooling and acidulated liquors.

In order to mitigate the cough, pectoral medicines and anodynes are to be employed.

Persons in the measles do not bear cold air, as in the small-pox.

Any tendency to hectic and consumptive disorders should be obviated by moderate exercise, country air, a milk and ascetic regimen ; issues and open blisters frequently relieve the internal parts, and make a successful effort towards the external parts of the body.

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In some cases, though rarely, the measles have assumed a malignant form, and required bark and antiseptic medicines.

OF THE DYSENTERY.

This disease is accompanied with fever, tenesmus, and frequent stools, with pain in the bowels; in general the stools are extremely putrid, and tinged with blood.

It may be distinguished into the sporadic or epidemic, into the more mild and malignant, into such as is attended with blood, or only the abraded mucus of the bowels.

The history of the disease is as follows :

The patient for some days complains of a loss of appetite; distension of the abdomen, with lassitude; a horripilation, which is succeeded by a quick pulse, great heat, restlessness, nausea, vomiting, pain in the stomach, anxiety of the præcordia, violent griping, frequent small stools, which are bloody, sanious, and mucous, often in a putrid state, and mixed with fleshy, skinny, fibrous matter; much *borborygmi*, and flatulency, tenesmus, strangury, and *prolapsus ani*; great debility, a sense of burning heat in the internal parts, with cold extremities, hiccup, and cold sweats; in the last stage the pain disappears, and the *fæces* are discharged involuntarily; the pulse sinks and intermits before death.

It appears from the dissection of morbid bodies, that the colon and rectum are chiefly the seat of the disease; they are preternaturally thickened, exulcerated, and the villous coat abraded, and there are ichorous pustules on the internal surface of the great intestines.

It is distinguished from diarrhœa by its being accompanied with more pain and tenesmus, as well as bloody stools; the fever, however, which is most generally of the putrid kind, is the chief distinction.

This disease is very uncertain in its event; it is most dangerous when it attacks weak and scorbutic habits, persons advanced in age, or gravid women.

Vomiting with hiccup are dangerous symptoms.

An universal and gentle moisture on the skin, together with a sediment in the urine, are favourable symptoms. Convulsions with delirium, a very quick and weak pulse, are bad symptoms. *Aphthæ* in the throat, with dry fauces and difficult deglutition, threaten immediate danger.

The dysentery attacks those who have been formerly subject to it, and such as have any constitutional debility of the stomach or intestines, who have been subject to bilious complaints, and who have suffered from improper and corrupted food. An improper exposure to cold and moisture, especially in hot countries, readily induce it.

The epidemic dysentery rages chiefly in the autumnal months, when the evenings are cold after very hot days.

It is a contagious disease, and generally arises from putrid matter introduced into the body.

It is greatly favoured by that state of atmosphere which promotes putrefaction.

The cure of dysentery is best conducted by evacuating the *primæ viæ* early.

For this purpose the combined action of emetics and purgatives proves the most successful.—Vide *Formul. Select.* No. 173.

It is distinguished from others by its being covered
 painted with more care and attention as well as being
 fitted the best, however, which is not generally the
 the point of view is the most important.

This class is very common in its own right and is well
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It is chiefly after large evacuations, that ipecacuanha in small doses, or opiates to palliate tenesmus, do good.

The operation of rhubarb is too inconsiderable here, and the more active stimulating cathartics, as calomel and the resinous purgatives, frequently irritate and inflame.

The neutral salts answer best, nor are we to be discouraged from their use by the frequency of stools, which are generally little more than mucus evacuated from the rectum by tenesmus, while hardened feces are often lodged in the colon.

In some cases where the patient is of a very plethoric habit, and symptoms threatening inflammation come on, bleeding may be proper.

The acrimony of the contents of the intestines should be diluted by mucilaginous and demulcent fluids, emollient clysters, and sometimes with opium, which takes off the irritation, and quiets the tenesmus.

The occasional use of opiates does good, mixed occasionally with ipecacuanha, as in Dover's powder.—*Pulv. Ipecac. comp.* (Ph. Lond.)

Astringents are only safe and proper after evacuations have been employed, and when the disease is kept up by the weakened and irritable state of the bowels.

In some cases it may be necessary to employ fomentations and even blisters to the abdomen.

Great care should be taken to avoid exposure to the effluvia of dysenteric stools, and the other occasional causes of this disease.

In cases of diarrhoea, astringents and opiates may be used with more freedom; rhubarb answers best in such cases; stomachic and tonic medicines, with bitters, are very proper, and necessary to prevent a relapse.—*Vide Formul. Select. No. 95, 153, 154.*

OF CHOLERA.

In this disease there is a constant and violent discharge of bile by vomiting and purging.

The disease is preceded by nidorous eructations, heartburn, pain of the stomach and intestines; afterwards excessive vomiting and purging of a bilious matter of different colours; distention of the abdomen; quick, weak, and unequal pulse; pain, and spasm of the extremities; violent pain in the region of the umbilicus; retention of urine; cold sweats; hiccup; palpitation of the heart, and universal convulsions.

The remote causes are, food of difficult digestion, as rancid butter; the colder fruits, such as cucumber and melon, and perhaps most fruits used in excess; active and violent purgatives; poisons; violent passions of the mind, and very acrid bile.

This disease prevails in the autumnal months, from exposure to cold evenings, after very hot days.

A gradual diminution of symptoms, especially of the vomiting, succeeded by sleep and a gentle moisture on the skin, affords a favourable prognosis; while spasm of the extremities, with great debility and intermittent pulse, with foetid vomiting, is unfavourable.

The cure depends upon early dilution, and promoting the vomiting by chicken broth, warm water, and the like; frequent emollient clysters are likewise proper.

In case of spasm and convulsions, opiates should be given with freedom.

Anodyne and warm plaisters may be applied with advantage to the abdomen. *a* -

Sp. conceives that usually Cholera
is in consequence of diseased
action in the liver pouring
out unusual quantities
of bile — & this often
of an offensive kind. —

— In some cases bleeding may
suffice. —

- a - Blisters & fomentations
also. —

Never give emetics.

Stools more or less offen-
sive according to the de-
gree of irritation under
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The diarrhœa should not be suddenly or totally checked.

The tonic plan by bark and chalybeates may be employed towards the last to remove the predisposition to a relapse.

OF HÆMORRHAGY.

By hæmorrhagy we mean an effusion of blood from the vessels of a living body.

It may be distinguished into active or passive; by the former we mean hæmorrhagy depending on an increased action of the vessels, either of a particular part or of the whole body, generally preceded by a febrile paroxysm, and attended with inflamed blood; by the latter we mean such as either depends on some local injury, or on the diseased state of the animal fluids, and which is not necessarily accompanied with inflammation or fever.

It is more particularly the former, or active hæmorrhagy, which we shall treat of in this place.

Active hæmorrhagies generally occur in plethoric habits, and those of a sanguine temperament; they appear in the spring or beginning of summer.

A sense of weight, oppression, tension, or heat, are generally felt in the region of the part, before the blood appears. There is frequently a cold and hot stage of fever, which precedes the hæmorrhagy.

The pulse is generally full, frequent, and hard, and becomes softer as the hæmorrhagy advances.

When hæmorrhagy depends on internal causes, it is very apt to recur, and sometimes at stated periods.

Hæmorrhagy, from an internal cause, is owing to an encreased determination of blood to a particular part, producing a greater action of vessels in that part, by which the blood is poured into vessels whose capacities do not naturally receive it, so that their extremities are distended, and an effusion takes place.

As the growth of the human body does not proceed equally in every part of it, the causes of distension are unequally applied; some parts of the body are necessarily first evolved, therefore they acquire their utmost bulk sooner than others.

This appears to be particularly the case with regard to the head, the parts of which are first evolved, and therefore soonest acquire their full size.

Hæmorrhagy of the nose is that which occurs first, from any increased determination of blood to the head.

This hæmorrhagy takes place before the period of puberty.

An hæmoptoe is the hæmorrhagy which takes place after the age of puberty, from a defect in the balance between the system of the aorta and the pulmonary vessels, or from an inequality of growth, giving rise to a narrow chest, and a consequent impediment to the free action of the lungs.

From the period of puberty, to thirty-five years of age, hæmoptoe most generally takes place.

In the latter periods of life, hæmorrhagies occur chiefly from the venous system, as from the extremities of the hæmorrhoidal veins.

Venous blood effused on the internal surface of the bowels, produces hæmorrhagy of a black coloured blood.

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Venous blood, effused into the cavity of the cranium, produces apoplexy.

So that the disposition to arterial hæmorrhagy is in the early periods of life; to venous hæmorrhagy in the more advanced periods of life.

The remote causes of hæmorrhagy are,

1. External heat.
2. The sudden diminution of the weight of the atmosphere.
3. Whatever encreases the force of the circulation, particularly violent efforts, and the violent action of such parts, as are more especially susceptible of hæmorrhagy at particular periods of growth; thus, violent speaking, or any other violent exercise of the respiratory organs, may produce hæmoptoe.
4. Particular postures of the body, and ligatures, producing great pressure, and therefore favouring local congestion.
5. External violence.
6. Cold externally applied, and thereby determining blood more forcibly on the internal parts.

Though hæmorrhagy may sometimes be supposed to produce its own cure, and that a necessity for it, from plethora, prevails in the body, so as to render it dangerous to check it, yet in general it ought to be avoided, and the recurrence of it always rendered unnecessary by means the most effectual for reducing plethora.

All hæmorrhagies but the menstrual are preternatural, and such as ought to be checked, and their return guarded against by every possible means.

The plethoric state of the system which favours active hæmorrhagy, may be moderated,

1. By avoiding animal food, by the use of a vegetable and aſceſcent regimen.

2. By moderate exerciſe, ſo that the *egeſta* ſhall be in a due proportion to the *ingreſta*. In the uſe of exerciſe, regard is to be had to the ſeat of the hæmorrhagy; perhaps riding on horſeback is ſafer than walking.

3. By proper evacuations, ſuch as blood letting and purging, eſpecially the latter, as the former frequently encourages the return of plethora.

4. By acids and neutral ſalts, ſuch as nitre.—Vide *Formul. Select.* No. 3, 139.

Hæmorrhagy itſelf may be ſucceſſfully moderated by avoiding any irritation; by the antiphlogiſtic regimen, and cool air; by the uſe of nitre and acids; by blood letting, eſpecially when the loſs of blood is attended with any conſiderable degree of fever, or been preceded by a cold fit.

Emetics by ſome have been recommended in hæmorrhægies, eſpecially in hæmoptoe; they have been found uſeful in uterine hæmorrhagy.

In ſome caſes of very profuſe hæmorrhagy, aſtringents may be ſafely applied; they always act with moſt power when they can be applied to the ſeat of the diſeaſe. — a

The vegetable aſtringents are very weak, except in hæmorrhagies of the primæ viæ.—Vide *Formul. Select.* No. 57, 58, 59.

The preparations of iron increaſe active hæmorrhagy by their ſtimulus on the heart and arterial ſyſtem; they ought not to be employed in hæmorrhagy, but ſuch as is of the primæ viæ, to which parts they are locally applicable.

The preparations of lead are more powerful, but we

-a- Both kinds of astringents
have any effect on hemorrhages
except when applied locally
as they may be to the
stomach & intestines.

- a - 8/7/73. Thanks in hemoptoe
especially no remedy to be pre-
ferred to opiates as directed
here. -

are restrained in the use of them, from their deleterious effects. — *but use them sometimes.*

Alum is probably the best fossil astringent, and liable to the fewest objections.—Vide *Formul. Select.* No. 11, 12.

Cold water directed on the part, and even sometimes when applied to the surface of the body, acts as an astringent.

Opiates may be employed with advantage when the fullness of the habit has been reduced by bleeding. — *a* —

Fainting or *deliquium animi* frequently check active hæmorrhagy.

The general doctrine of hæmorrhagy being explained, the application of it to cases of particular hæmorrhagy is easily made.

OF THE SCURVY.

It is difficult to define this disease, its symptoms being so various and anomalous; though differing essentially from all other diseases.

Its remote causes are, cold and moisture, accompanied with corrupted animal food, a deficiency of vegetable food, and bad water.

It is a disease which rages chiefly at sea, and in northern latitudes.

It more especially attacks those who have been exhausted by preceding disorders, who are of an indolent disposition, and who are less attentive to cleanliness.

The blood, and other animal fluids in this disease, point out a process of decomposition having begun in the body.

The symptoms are the following :

Weakness, lassitude, unusual fatigue on motion ; difficult respiration ; redness, tumour, itching, and ulcers of the gums ; carious teeth, and fœtid breath ; weak, hard pulse, easily quickened on motion ; high coloured fœtid urine ; pains and tumours of the tibia ; muscular and transitory pains through the cavities of the thorax and abdomen ; salivation ; watchfulness ; palsy of the extremities ; hæmorrhagies from different parts of the body of seemingly dissolved blood ; dry scabs ; livid spots becoming phagedenic ulcers, terminating in gangrene ; a livid countenance ; irregular and remitting fever ; palpitation of the heart ; stricture of the œsophagus ; rigidity of the tendons and muscles ; dejection of mind ; the breaking out of old ulcers ; obstructed viscera ; gangrene ; dropsy, and death.

The cure consists in correcting the seemingly diseased state of the fluids, and in restoring the strength of the patient.

These indications are chiefly answered,

1. By gentle laxatives of rhubarb, tamarinds, or cream of tartar.
2. By a diet of fresh vegetables, or vegetables preserved in such a manner as to be capable of undergoing a process of fermentation, as malt, sour-cROUT, fruits preserved by drying, or sugar.
3. By the use of wine, and other antiseptics.
4. By fresh water, and frequent change of clothes, dryness and cleanliness.
5. By moderate exercise.
6. By the use of bark and the fossil acids.
7. Particular symptoms may be palliated by opiates, spirituous and aromatic fomentations.

the first of the month, the weather was very warm and the sun was shining brightly. The wind was from the south and the sea was calm. The water was very clear and the bottom was sandy. The fish were very numerous and the birds were very noisy. The people were very happy and the children were very playful. The day was very pleasant and the weather was very good. The sun was very hot and the wind was very strong. The sea was very blue and the sky was very clear. The water was very deep and the bottom was very hard. The fish were very big and the birds were very small. The people were very old and the children were very young. The day was very long and the night was very short. The sun was very bright and the moon was very dim. The stars were very many and the planets were very few. The world was very big and the universe was very small. The life was very hard and the death was very easy. The love was very sweet and the hate was very bitter. The joy was very pure and the sorrow was very deep. The hope was very bright and the despair was very dark. The faith was very strong and the doubt was very weak. The courage was very great and the fear was very small. The wisdom was very deep and the ignorance was very shallow. The knowledge was very vast and the understanding was very narrow. The power was very great and the weakness was very small. The strength was very firm and the weakness was very flimsy. The beauty was very perfect and the ugliness was very repulsive. The goodness was very pure and the evil was very corrupt. The truth was very clear and the lies were very deceptive. The honesty was very open and the dishonesty was very hidden. The kindness was very gentle and the cruelty was very harsh. The compassion was very tender and the indifference was very cold. The sympathy was very warm and the antipathy was very cold. The tolerance was very broad and the intolerance was very narrow. The patience was very long and the impatience was very short. The perseverance was very strong and the persistence was very weak. The determination was very firm and the indecision was very wobbly. The resolve was very strong and the hesitation was very weak. The will was very strong and the weakness was very small. The power was very great and the weakness was very small. The strength was very firm and the weakness was very flimsy. The beauty was very perfect and the ugliness was very repulsive. The goodness was very pure and the evil was very corrupt. The truth was very clear and the lies were very deceptive. The honesty was very open and the dishonesty was very hidden. The kindness was very gentle and the cruelty was very harsh. The compassion was very tender and the indifference was very cold. The sympathy was very warm and the antipathy was very cold. The tolerance was very broad and the intolerance was very narrow. The patience was very long and the impatience was very short. The perseverance was very strong and the persistence was very weak. The determination was very firm and the indecision was very wobbly. The resolve was very strong and the hesitation was very weak. The will was very strong and the weakness was very small.

The second of the month, the weather was very warm and the sun was shining brightly. The wind was from the south and the sea was calm. The water was very clear and the bottom was sandy. The fish were very numerous and the birds were very noisy. The people were very happy and the children were very playful. The day was very pleasant and the weather was very good. The sun was very hot and the wind was very strong. The sea was very blue and the sky was very clear. The water was very deep and the bottom was very hard. The fish were very big and the birds were very small. The people were very old and the children were very young. The day was very long and the night was very short. The sun was very bright and the moon was very dim. The stars were very many and the planets were very few. The world was very big and the universe was very small. The life was very hard and the death was very easy. The love was very sweet and the hate was very bitter. The joy was very pure and the sorrow was very deep. The hope was very bright and the despair was very dark. The faith was very strong and the doubt was very weak. The courage was very great and the fear was very small. The wisdom was very deep and the ignorance was very shallow. The knowledge was very vast and the understanding was very narrow. The power was very great and the weakness was very small. The strength was very firm and the weakness was very flimsy. The beauty was very perfect and the ugliness was very repulsive. The goodness was very pure and the evil was very corrupt. The truth was very clear and the lies were very deceptive. The honesty was very open and the dishonesty was very hidden. The kindness was very gentle and the cruelty was very harsh. The compassion was very tender and the indifference was very cold. The sympathy was very warm and the antipathy was very cold. The tolerance was very broad and the intolerance was very narrow. The patience was very long and the impatience was very short. The perseverance was very strong and the persistence was very weak. The determination was very firm and the indecision was very wobbly. The resolve was very strong and the hesitation was very weak. The will was very strong and the weakness was very small.

OF THE DROPSY.

This is an extravasation of a serous fluid, either into the cellular membrane or other cavities of the body.

It has been distinguished, according to its seat, into *Anasarca*, *Ascites*, *Hydrops Pectoris*, *Hydrops Uteri*, *Hydrocele*, *Hydrocephalus*, and other species.

The remote causes of dropsy are, a crude farinaceous diet; the abuse of spirituous and vinous liquors; cold water taken largely when the body is heated; a suppression of the menses; hæmorrhoids, and other evacuations; irregular gout determined on internal parts; violent hæmorrhages or other evacuations, which have reduced the strength of the patient; preceding asthma, diarrhœa, phthisis pulmonalis, jaundice, intermittent and other fevers, scirrhus viscera, polypi in the heart, and other causes which may impede the return of venous blood to the heart.

In all cases of dropsy, the powers of absorption are insufficient for resuming into the habit the fluid which is effused into the different cavities of the body.

From the enumeration of causes already given, it will be easy to apply them to particular cases, which may be necessary for the purpose of more successfully treating the disease.

In *anasarca* the body is pale, the animal fibres soft and yielding, the feet and legs become œdematous towards night, while the cellular membrane of the upper extremities appears distended with water in the morning.

In some, the accumulation and diffusion of water in the cellular membrane is universal, the urine is secreted

in small quantity, and there is in general a considerable degree of dyspnœa.

In *ascites*, there is a considerable tumour of the abdomen from the distension of water between the peritoneum and abdominal viscera. There is frequently a great difficulty of breathing from its pressure on the diaphragm; a sense of fluctuation may be perceived; the upper extremities are wasted; there is generally much thirst; the urine high coloured and in small quantities; a disposition to piles; a pale emaciated countenance. The *anasarca* and *ascites* are frequently complicated.

In a dropsy of the ovarium, the progress of the tumour is very slow and gradual, there is less sense of fluctuation, there is little or no thirst, and the health of the patient is very little affected.

In *hydrops pectoris* the difficulty of breathing is most considerable; it often returns suddenly in the form of paroxysm, with a dry cough, fluttering irregular pulse, and very often anasarcaous appearances in other parts of the body.

Dropsy is sometimes removed by a diarrhœa, an increase in the secretion of urine, or a rupture of the skin.

Ascites is distinguished from the tumour of pregnancy, by the countenance of the patient, the sense of fluctuation, thirst, and general debility: the distinction is more difficult in cases of encysted dropsy.

The prognosis is very uncertain; if the appetite be preserved, if the urine be increased, and no appearance of diseased viscera, the patient may be restored.

If again on the other hand the viscera be obstructed and diseased, with much thirst, cough, weakness, and

wasting of the body, and more especially a fallow or jaundiced complexion, then the cure is more uncertain.

The cure of dropsy chiefly depends on the proper use of evacuations.

The most effectual means of discharging water from the different cavities of the body, but more especially in the ascites are,

1. By purging and vomiting.—Vide *Formul. Select.* No. 78, 94, 115, 118.

2. By diuretics—Vide *Formul. Select.* No. 120, 169, 170, 171.

In dropical patients there is generally much dryness of the skin, and therefore sudorific remedies should be sometimes employed.

Does an abstinence from liquids contribute to the cure of dropsy?

After evacuations have been employed, the tone of the fibres should be restored by the use of bitters and chalybeate remedies.—*Formul. Select.* No. 87, 88, 89, 95.

By external applications, gentle support by bandages, friction, cold bathing, a dry and pure atmosphere, moderate exercise. In some cases mercury, as an alterative, has been found successful. In cases of suppressed evacuations, an attention should be directed in order to restore them.

In recent cases of ascites, the paracentesis has been most successfully employed; and in anasarca cases, where there is a great distension of the cellular membrane, puncture in the extremities, or blisters, will often relieve, while proper means are employed to obviate the gangrene of the parts.

The treatment of the hydrocele, and other cases of encysted dropfy, will be understood from what we have already observed; and the propriety of preferring the radical cure by inducing inflammation and consequent adhesion, when it can be done with safety, to the more palliative cure.

There are some symptoms very peculiar to the *Hydrocephalus*, which shall be taken notice of in another place.

OF THE ASTHMA.

Asthma is an impeded and difficult respiration, attended with a sense of suffocation.

It is distinguished into the periodical or continued, into the humid or dry asthma, into the idiopathic or symptomatic.

It arises from various causes, among which may be reckoned the following:

A vitiated state of the atmosphere; violent passions of the mind; the repulsion of eruptions and cutaneous inflammation; the drying of old ulcers; the receding of gout; water in the cavity of the thorax or cells of the lungs; obstructions of the bronchial tube; and a certain irritable state of the organs of respiration, more especially the diaphragm.

In the periodical asthma, the following symptoms occur in the paroxysm:

Flatulency and distension of the stomach, with a sense of stricture, heat, fever, drowsiness, head-ach, nausea, and pale urine.

The lungs feel rigid; the breathing is disturbed; general torpor, especially of the extremities, and in the night-time all the symptoms are encreased; bilious vomiting frequently comes on; an involuntary flow of tears; a small, weak, intermitting pulse; palpitation of the heart; a livid countenance; with a sense of immediate suffocation. The difficulty of breathing gradually abates, some degree of expectoration comes on, the urine deposits a sediment, and the paroxysm ceases.

In the more violent attack of the disease, œdematous tumours of the hands and feet come on, and the patient becomes dropical or consumptive; sometimes the disease terminates in apoplexy and palsy.

The prognosis is more favourable in young than in old habits, and in cases from repressed evacuations, than from other causes; the more frequent and violent the paroxysm, the worse.

It generally proves fatal when it terminates in peripneumony. It is more especially dangerous when the pulse is irregular and intermittent, with syncope, palsy of the lungs, palpitation of the heart, and the urine secreted in small quantity.

Towards the end, the extremities become cold, the pulse is small and obscure, the breathing becomes more difficult, and the patient dies.

In the continued asthma, there are symptoms which resemble catarrh, the disease does not return by severe paroxysms, the dyspnoea is relieved by expectoration, and the patient becomes very sensible to the least variation in the state of the atmosphere.

In the periodical asthma, the stricture is removed by

nauseating doses of emetics, by clysters, by the pediluvium, by the use of opiates and other antispasmodics. In cases of great severity, bleeding may afford a palliative relief.—Vide *Formul. Select.* No. 22, 130, 131, 141.

In the continued asthma, we are to have recourse to, attenuating remedies, diluent and tepid liquors, emetics; in some cases to gentle laxatives, issues, or open blisters, the occasional use of opiates, moderate exercise, and a warm climate.

OF INDIGESTION.

This is a disease to which studious and sedentary persons are extremely subject.

It is frequently induced; by grief and anxiety; by gluttony; by too flatulent and farinaceous a diet; by violent and excessive evacuations; the abuse of active emetics and purgatives; preceding disorders, especially of the liver, and is sometimes connected with hysteric and hypochondriacal complaints.

The proximate cause may be a weakened and irregular peristaltic motion of the stomach, which may affect the power of the menstruum secreted by the stomach, on which the digestion and solution of our aliment depend.

The patient complains of anxiety and distension, with flatulent eructations, a disagreeable sense of oppression after eating, heart-burn and acidity, especially when the stomach is empty; the body is either costive, or there is a diarrhœa; the appetite irregular, sometimes good; a weak, small pulse, generally slow, but easily quickened.

Anxiety of mind; vertigo; palpitation of the heart; great watchfulness; heat and flushing after eating; and

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many symptoms in common to hypochondriacal complaints.

Such disorders of the stomach are frequently obstinate, and very liable to return on the least irregularity.

They are best obviated,

1. By emptying the stomach, by a few grains of ipecacuanha, and assisting the operation of the vomit, by an infusion of camomile flowers, or other agreeable bitters.

2. By the use of tonic bitters in small doses, together with gentle chalybeats.—Vide *Formul. Select.* No. 60, 89, 95. 153.

3. By gentle exercise on horseback.

4. By light animal food, and by avoiding the more indigestible and farinaceous vegetables, such as potatoes, peas, beans, &c.

5. The common drink should be toast and water; perhaps in some cases a little porter, sometimes a little brandy, or rum and water, without either sugar or lemon; but care should be taken to guard against the abuse of these.

Violent evacuations should be avoided, the body should be kept soluble by the gentlest laxatives.

In cases of prevailing acidity, small doses of rhubarb, and the absorbent earths should be used. In many cases great benefit may be derived from the use of lime-water.

In some cases there is a great secretion in the stomach of a viscid pituitous mucus; the appetite is destroyed; the tongue foul; a distension after eating; vertigo; fainting; an irregular fever; nausea and vomiting.

These symptoms are best removed by emetics repeated occasionally, bitter and chalybeat remedies, lime-water, and sometimes the use of *Natr. Prep.* in small doses.

In all disorders of the stomach, the clothing should be warm, especially of the feet and legs.

OF THE PILES OR HÆMORRHOIDS.

They are distinguished into the open or blind, into the external or internal.

The proximate cause is, a distension of the hæmorrhoidal veins, or an effusion of venous blood into surrounding cellular membrane.

The remote causes are, an obstruction or resistance from pressure, from an enlargement of the abdominal viscera, to the returning venous blood; they frequently arise from the irritation and pressure of indurated fæces; they are generally the salutary effects of the habit in the advanced stages of life, when a venous plethora is liable to come on; they are therefore frequently rather to be promoted than suppressed.

They are particularly useful in relieving disorders of the head.

The inflammatory symptoms are to be moderated either by general or topical bleeding, and an attention to the antiphlogistic regimen.

Gentle and cooling laxatives are to be occasionally employed.

Much exercise must be avoided, and sometimes fomentations are proper.

They sometimes suppurate and degenerate into fistulous ulcers.—Vide *Formul. Select.* No. 138, 187, 192.

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OF JAUNDICE.

This disease may be defined a yellow colour of the skin, and tunica albuginea of the eye, from the presence of bile in the blood vessels.

It is distinguished into the yellow and black jaundice, into the continued and periodical, into the idiopathic and symptomatic, into the critical or symptomatic, into that accompanied with or being without fever.

The remote causes are various.

1. Hysterical or spasmodic choleric.
2. The active operation of some poisons, and sometimes of the more acrid purgatives.
3. Anger, grief, and other violent affections of the mind.
4. Pressure on the biliary ducts, from tumours, pregnancy, &c.
5. Diseases of the liver, inflammation, scirrhus, &c.
6. Biliary calculi.

The proximate cause is the regurgitation of bile, and the consequent absorption of it into the habit.

The symptoms are the following :

1. A great degree of torpor and lassitude ; a yellow colour on the eye and skin ; a costive habit ; an impaired appetite ; the fæces of a light clayey appearance ; the urine thick, and tinging linen of a yellow colour ; the other secretions likewise affected.

A sense of weight, fullness, and pain often in the right hypochondrium ; the breathing affected ; nausea and vomiting ; an itching of the skin, with small red eruptions on it ; pulse sometimes very slow, at other

times quick, with a dry heat on the skin, which terminates often in colliquative sweats; diarrhœa, and other symptoms of hectic fever.

The prognosis is more favourable in young persons than old, in strong than weak habits; the lighter the colour of the skin the better: it is always bad when complicated with other diseases. When the jaundice comes on in the later periods of fever, it is sometimes favourable, unless accompanied with symptoms of local pain and inflammation, in which case the danger is greater.

It is favourable when attended with a natural moisture on the skin, and a freedom of the other secretions.

It is very bad when attended with dropsy.

The cure must vary according to the cause producing the disease.

In cases of inflammation and fever, bleeding may be necessary.

The secretion of bile may be restored by vomits, especially by tartarised antimony given in small and divided doses.

The body should be kept soluble by small doses of rhubarb, gum ammoniac, and soap.—Vide *Formul. Select.* No. 22, 74, 95, 155, 156.

In cases of acute pain without fever, opiates given largely, frequently promote the passage of biliary calculi, and remove spasm of the ducts.

Great advantage has been found from the use of orange and lemon juice, taken in the quantity of four or six ounces in the day.

Many specifics have been recommended in this disease, the operation of which must be very fallacious, from the nature of the disorder.

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OF THE DIABETES.

It is distinguished by the great secretion of urine, which is manifestly sweet; there is likewise a considerable degree of thirst, and other symptoms of hectic fever; the saliva is extremely viscid; there is pain in the loins, costiveness, debility and marasmus, a dry skin, œdematous swellings of the lower extremities, colliquative evacuations, and death.

This disease seems originally seated in the *primæ viæ*, though the symptoms ultimately appear in the kidney.

The urine retains so much of vegetable and saccharine matter, as to be capable of undergoing the vinous fermentation.

The disease has been successfully treated by bitters, tonic and chalybeate remedies, and by the use of Bristol water.

Moderate exercise, cold bathing, and food of easy digestion, more especially animal food, are found to be of great importance.—Vide *Formul. Select.* No. 68, 132, 140, 153.

OF CALCULOUS CONCRETIONS IN THE
KIDNEY AND BLADDER.

The symptoms of calculi in the kidney are, acute pain, or sense of weight and uneasiness in the region of the kidney; increased heat; nausea; vomiting; costiveness; an exacerbation of symptoms after eating; an appearance of sand in the urine; in some cases there

is bloody and purulent urine, and in others, ischuria, coma, inflammation and death.

The left kidney is more frequently affected than the right.

If the calculus descends into the ureter, it occasions very violent pain along its course towards the bladder; a numbness of the leg and thigh of the affected side; a retraction of the testicle, and sometimes a suppression of urine.

A calculus in the bladder is attended with difficulty and pain in making water; a constant *tenesmus urinae*; a painful irritation towards the extremity of the glans; the urine much loaded with mucus; the pain more violent in the discharge of the few last drops of urine which is frequently tinged with blood, especially after violent exercise.

The remote causes of this disease are,

1. An hereditary predisposition, probably connected with gouty diathesis.
2. A sedentary life.
3. The long retention of urine.

Is the production of calculi influenced by regimen, such as the use of particular liquids, supposed to contain more or less of earthy matter; or is it more probable that the irregularities productive of gout, may contribute to the formation of calculous matter?

The remedies employed either to dissolve calculous matter and promote its evacuation, or to lessen the disposition to its production, are called *Lithontriptics*, which act,

1. By dissolving the calculus in the urinary passages.

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2. By removing the disposition in the body to its formation.

3. By dissolving the glutinous matter which keeps united the earthy part.

Chemical experiments prove, that the component or elementary parts of human calculi are not the same in all persons, therefore there can be no universal menstruum.

Before the use of any solvent, it would be proper to examine the patient's urine, and the matter which it is found to deposit.

The principal variety of solvents may be reduced to alkali or acid.

Of the first is the *Aq. Kal. pur. Ph. Lond.*

Of the second, *Carbonic Acid Gas.* or *Fixed Air*, introduced in a great variety of forms, as impregnating water, as escaping from effervescing draughts, or in the more agreeable form of brisk and fermented liquors.

To these may be added lime water, and the solutions of the fixed alkalis super-saturated with carbonic acid.

Alkaline solvents appear to act chiefly by dissolving the animal gluten, and destroying thereby the texture of the stone.

Painful symptoms from the irritation of calculi have abated on the use of the *uva ursi*, and sometimes on the use of other bitters and astringents.

On this subject much must be referred to our Chemical Lectures.

OF THE CHOLIC.

It may be defined an acute pain of the intestines, attended with costiveness.

It may be distinguished into the flatulent and spasmodic, into the acute and chronic, into that which is accompanied with fever, or in which there is no fever.

The remote causes of cholic are various :

1. A constitutional irritability of the bowels.
2. An increased secretion of acrid bile, with an obstruction to its free passage by the intestines.
3. Any thing extraneous in the bowels, whether arising from indigested aliment, insoluble concretions, or other causes.
4. A determination of gouty matter, or the translocation of any acrid fluids, from external cold or other causes.
5. The action of lead, to which artificers in that metal are subject, and likewise those who drink fermented liquors adulterated with it.
6. The action of other metallic and active poisons.
7. The imprudent use of astringents in diarrhoea and dysentery.

The danger in this disease arises from inflammation coming on, as appears from the dissection of morbid bodies.

The symptoms in general are the following :

An acute pain in the regimen of the abdomen ; heartburn and bilious vomiting ; costiveness ; frequent eructations ; tension in the abdomen ; thirst ; hiccup ; syncope ; an irregular low pulse, with cold sweats and other symp-

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toms which occur in the sphacelated state of the intestines.

The cholic sometimes, but more especially that arising from lead, terminates in palsy, and is attended with rheumatic pains in different parts of the body.

The prognosis is more particularly favourable when the pain remits and changes its position, and when it is diffused, from being fixed to a point, over a large surface. Watchfulness, hiccup, delirium, a dry tongue, syncope, and cold sweats, are to be considered as the most fatal symptoms.

In the cure the indications are,

1. To relax the spasm.
2. To procure evacuations.

The spasm and tension is best removed by bleeding, fomentations, the external applications of warm plaisters, and in some cases even of blisters, clysters, and opiates joined to purgatives.

Evacuations are best procured by the use of salts in peppermint-water, *Ol. Ricini*, and in some cases, *Extract. Colocynth. comp.* and purgative clysters of the neutral salts, *Tobacco*, and the like.—Vide *Formul. Select.* No. 36, 74, 122, 159.

In cases of metallic poisons, oil with the neutral salts, given in a bulky form, answer best.

It frequently happens, that the cholic in hysterical cases, depends so much on spasm and simple irritation, that opiates alone, or united with warmer aromatics, as the *Confect. Opiat.* do best.

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OF APOPLEXY.

Apoplexy is the abolition of all sensation, both internal and external, in which, however, the motion of the heart and lungs are preserved.

It is distinguished from its degree of violence, and likewise into the sanguineous or serous apoplexy.

There have been many instances of sudden death, supposed to arise from apoplexy, which dissection has proved to depend on polypus, and frequently a rupture of the cavities of the heart.

Apoplexy more especially seizes the sedentary and plethoric; those who have short necks; who have been addicted to the luxuries of the table; and are from fifty to sixty years of age.

The remote causes are, whatever tends to determine too large a quantity of blood to the head; the suppression of former evacuations; excesses in eating and drinking; violent injuries of the head from external means; tumours compressing the brain; the extravasation or effusion of blood in the substance of the brain.

The fit is generally preceded by a *torpor* of the senses, an impediment of speech, vertigo, head-ach, a tremor and numbness of the extremities, *stridor dentium*, a noise in the ears, hysterical and hypochondriacal affections, a sense of fulness and distension of the abdominal region, the breathing remarkably slow and difficult.

It sometimes happens that the patient is seized suddenly with the loss of all the animal functions, difficult respiration, cold extremities, redness of the countenance, great pulsation of the arteries, drowsiness, noisy respiration,

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saliva foaming from the mouth, a resolution of the sphincters of the *anus* and *bladder*, the patient is seized with vomiting, and recovers after a profuse sweat.

A palsy, or *hemiplegia*, is frequently the consequence of an apoplectic fit.

The prognosis is more especially favourable when the senses have been little impaired, and the function of respiration not much affected.

The sanguineous apoplexy is most dangerous, but of more easy cure than the serous apoplexy.

An impeded deglutition and respiration, with cold sweats, terminate fatally : apoplexy from external injury, unless remedied by the surgeon, proves immediately fatal.

The serous apoplexy is often removed by a fever and hæmorrhagy, especially from the hæmorrhoidal vessels.

In the sanguineous apoplexy the indications of cure are,

1. To bleed freely, either by the lancet, or cupping-glasses.
2. To apply blisters to the head, between the shoulders, or, in case of palsy, to the extremities.
3. To stimulate by purgatives or clyster.

In general, the error of practice is in the too free and early use of volatile and heating remedies.

If the apoplexy is of the serous kind, bleeding should be used with more caution.

An active vomit is frequently of use ; purgatives may be employed freely ; blisters, and even volatile remedies, may be afterwards used with more advantage.

In both kinds of apoplexy, an erect posture, and moderate heat, are best,

The most effectual means of obviating the return of apoplexy is by moderate evacuations, diet of easy solubility, and setons or issues, which produce a discharge of pus from the neighbourhood of the head.—Vide *Formul. Sele&*. No. 33, 74, 75, 119.

OF PALSY.

Palsy is the abolition or diminution of motion or sensation, or both, in one or more parts of the body.

It may be distinguished into that in which the feeling of the part is only affected, or where the power of motion, either with or without sensation, is destroyed.

It is likewise distinguished into *paraplegia*, *hemiplegia*, or more local affections, as of the tongue, eye-lids, sphincters of the anus or bladder, and the like.

The remote causes of palsy are,

1. Excess of eating or drinking; a scorbutic habit of body; the *colica pictonum*; a cold moist air; water or pus effused on the brain; wounds of the brain, or *medulla spinalis*; external pressure; suppression of former evacuations; apoplexy; convulsions; sudden fear, and other causes operating on the nerves; in children, depending on acrimony and irritation of the bowels.

The proximate cause is, the interruption to the influx of nervous fluid into the parts, from the brain, *medulla oblongata*, and *spinalis*, or from the nerves themselves.

Before the attack of palsy, there is frequently a degree of *torpor* of the senses, paleness, a sense of weight and uneasiness in the head, with occasional vertigo;

The first of these is the fact that the
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policy of expansion.

there is a sense of pricking or *sensatio formicationis* in the affected parts ; the diseased parts become cold and soft, they waste, and are frequently œdematous ; the pulse is generally small, soft, and slow, though sometimes quick and unequal ; sometimes the memory and other faculties of the mind are impaired.

A palsy preceded by apoplexy, frequently terminates in apoplexy.

It is seldom cured when depending on any external injury of the head, pressure or luxation of the spine, especially if the parts waste.

A pain in the affected parts, returning sensation, heat, *sensatio formicationis*, or tremor in the parts, prognosticate a recovery: a fever or diarrhœa often cures a palsy.

Paralytic affections of parts near the head, and of the upper extremities, are more difficultly removed than of the lower extremities.

The cure is best effected by the following means :

1. By bleeding in plethoric and inflammatory habits, in cases where the attack has been sudden, and where the head is much affected ; in other cases it is to be avoided.

2. By active purgatives and stimulating clysters, except in very old habits.

3. By the use of volatile and diffusive stimulants taken internally, or applied externally.—Vide *Formul. Select.* No. 14, 75, 165, 179.

4. In some cases, where the head has not been much affected, vomits have been useful.

5. External warmth, but more particularly bathing in the hot bath, or Bath water.

6. The external applications are various; blisters, warm plaisters, volatile and acrid liniments, friction, and electricity, a diet of a light and nourishing kind.

The patient should avoid venery.

OF EPILEPSY.

Epilepsy is the privation of external and internal sensation, accompanied with violent convulsive motions of the whole body.

It may distinguished into idiopathic and symptomatic.

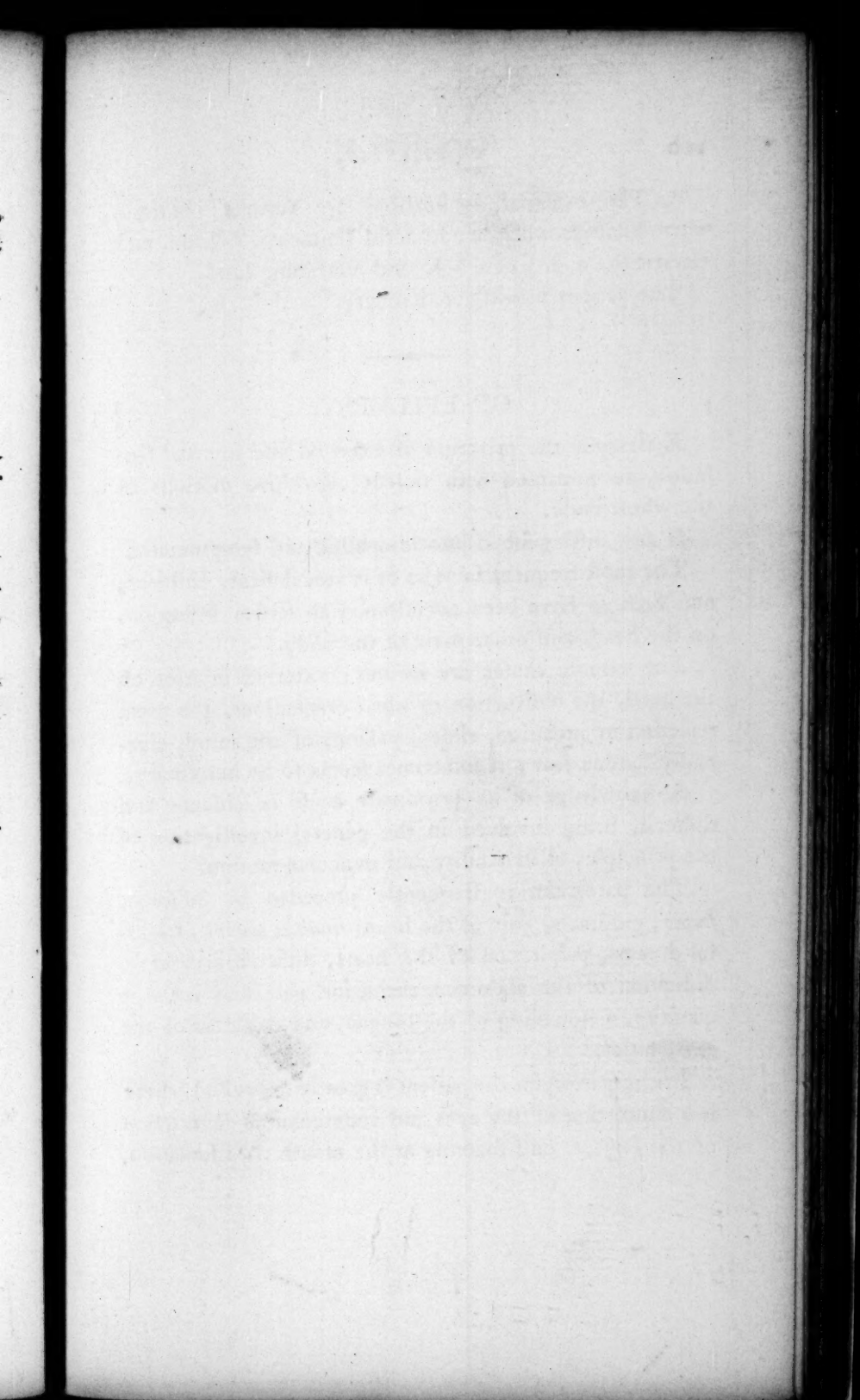
The most frequent subjects of it are, delicate children, and such as have been accustomed to ferous defluxions on the head, and other parts of the body.

The remote causes are various; external injuries on the head, the obstruction of usual evacuations, too great repletion or inanition, violent passions of the mind, especially sudden fear; it sometimes seems to be hereditary.

A knowledge of its proximate cause is obscure and difficult, being involved in the general investigation of the principles of irritability and muscular motion.

The paroxysm is frequently preceded by lassitude, *stupor*, giddiness, pain of the head, *tinnitus aurium*, frightful dreams, palpitation of the heart, difficult breathing, distension of the abdomen, the urine pale and in large quantity, a trembling of the tongue, and coldness of the extremities.

In the paroxysm the patient is greatly convulsed, there is a contortion of the eyes and countenance, contraction of the fingers, and foaming at the mouth; all sensation,



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and the faculties of the mind, are asleep; *semen, urine,* and *feces* are discharged involuntarily; on the remission of symptoms the senses are gradually restored, but there generally remain head-ach, lassitude, and torpor of the whole body.

The paroxysm is frequently produced by intemperance, intense study, or disagreeable and violent impressions on the mind.

The disease frequently disappears spontaneously at the age of puberty.

Intermittent fevers, and eruptions on the skin, sometimes remove it. It is in general very obstinate, especially if it attacks the adult, and has arisen from a fright; or if it be hereditary; it is always unfavourable, in cases where the memory and judgment have been impaired.

In some instances it terminates in apoplexy.

In the paroxysm we should endeavour to moderate the violence of the convulsive symptoms,

1. By bleeding from the jugular vein, or temporal artery, provided there are symptoms of plethora and local congestion in the head.

2. By applying stimuli to the lower extremities, such as blisters, or warm cataplasms.

3. By anodyne and antispasmodic clysters, or by liniments of the same kind rubbed along the spine.

The effects of external injuries, such as depressions, fractures, or extraneous bodies, should be removed.

In the interval of the paroxysm, our attention should be directed to obviate its return;

1. By proper evacuations.

2. By setons or open blisters.

3. By remedies which may remove the morbid irri-

tability, such as bark, preparations of steel and copper, and other tonics.

4. By the occasional use of antispasmodics.

5. In cases of symptomatic epilepsy, vomits may be used with advantage.

6. The morbid debility is frequently removed by cold bathing.—Vide *Formul. Select.* 31, 65, 79, 194, 196, 197, 198.

7. An attention is to be paid to regimen; in some cases a milk diet has proved the only means of removing the disorder.

OF CHOREA SANCTI VITI, OR ST. VITUS'S DANCE.

This is a convulsive disease, attended with a ludicrous motion of the arms and legs; there is a great disposition to palsy in this disorder.

It is frequently a symptomatic disease, originating from irritation of the *prima via*.

Women and children are more particularly subject to it.

It is seldom dangerous, though frequently very obstinate.

In some cases of plethora, it may be necessary to bleed; in almost all cases a brisk purgative or two ought to precede the tonic and antispasmodic remedies to be afterwards employed; of this kind are bark and steel, valerian, preparations of zinc and copper, and in some cases the *Oleum Succini*.—Vide *Formul. Select.* No. 31, 69, 70, 79, 194, 196, 197, 198.

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THE JOURNAL OF THE
AMERICAN MEDICAL ASSOCIATION
PUBLISHED WEEKLY
CHICAGO, ILL., U.S.A.

The Journal of the American Medical Association is a weekly publication of the American Medical Association, founded in 1882. It is the official journal of the Association and is published for the benefit of the medical profession and the public. The Journal contains original articles, reviews, and news of interest to the medical community. It is a valuable source of information for physicians and medical students alike.

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OF TETANUS, OPISTHOTONOS, AND
EMPROSTHOTONOS.

The tetanus is a fixed or involuntary contraction or spasm of almost every muscle of the body. In some cases the body is drawn forwards, called *emprosthotonos*, in others it is bent backwards, called *opisthotonos*; and when besides the general spasmodic affection there is an abolition of all the senses, it has received the name of *catalepsy*; they do not differ essentially from one another.

These diseases particularly prevail in the warmest climates, and in rainy seasons.

The disease, when particularly affecting the muscles of the neck, and those subservient to the motion of the jaw, is called *trismus* or locked-jaw.

They are very dangerous diseases, and frequently carry off the patient in three days.

The cure is to be attempted in plethoric habits, by bleeding and other evacuations.

In other cases the cure is chiefly promoted by the liberal use of opium and warm bathing.

In spasmodic diseases from external causes, an attention is to be directed to moderating the irritation by removing the cause.

Blisters, applied to the neck and throat, have been found useful.

Some successful trials have lately been made of the use of mercurial friction, so as speedily to bring on a salivation.

Tonic remedies and the cold bath may be afterwards employed for the recovery of the patient.

We have authority for the use of the cold bath, even in the first attack of the disorder.

OF HYSTERIA AND HYPOCHONDRIASIS.

Hysteria chiefly affects females, the unmarried or widows; in some cases the more delicate and irritable of the male sex, and those who have led a studious and sedentary life.

The remote causes are various; among the principal are the following:

1. Excessive evacuations, either by hæmorrhagies or otherwise.
2. Suppression of the menses or lochia, or the neglect of usual evacuations.
3. Great proclivity to venery.
4. Violent commotions of the mind.
5. Flatulent and ascendent regimen.
6. Former diseases which have greatly weakened the tone of the *prima vie*.
7. In some cases an hereditary irritability of the *prima vie*.

The symptoms are the following:

Pain in the forehead, an oppression on the organs of sense, the patient feels the *globus hystericus*, with a sensation of suffocation, palpitation of the heart, unequal pulse, frequent vomiting, either of a sharp acid matter, or green bile, difficult respiration, *clavus hystericus*, pain

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in the loins, coldness of the extremities, in some a pyralism, flatulency and distension of the abdominal region; the patient is sometimes suddenly deprived of all sense and recollection; the urine is very limpid and watery, and secreted in large quantities; the mind is extremely irritable, involuntary laughing and crying comes on, with violent convulsions, especially of the abdominal muscles.

This disease is seldom accompanied with danger; it is frequently in the power of the patient either to obviate or invite the accession of the paroxysm, though the symptoms after such accession become involuntary.

In the paroxysm we should attempt to quiet the spasms and convulsions.

1. In cases of plethora, where the head is much affected, by bleeding.

2. By the use of antispasmodics.

3. By the friction of the lower extremities.

4. By the pediluvium.

5. By antispasmodic and anodyne clysters.

In the interval of the paroxysm,

By strengthening the nervous system, and thereby removing the morbid irritability of it.

1. By gentle evacuations from the *prime viæ*.

2. By bitter and tonic remedies.

3. By exercise, especially riding on horseback.

4. By chalybeates.

5. By a milk diet in some cases, where other remedies are found ineffectual: suppressed evacuations are to be restored.

In cases of great uterine irritation, matrimony, and the antiphlogistic regimen, answer best.

In *Hypochondriasis* the more remarkable symptoms are, *dyspœsia*, with languor and dejection of spirits, head-ach, drowsiness, a languid pulse, cold extremities, costiveness, fallowness of the countenance, and often high-coloured urine.

This disease belongs to the more advanced periods of life, and is for the most part connected with sedentary habits, and depressing affections of the mind.

Its cure consists in a steady attention to regimen, exercise, and clothing; in obviating costiveness, by the more warm and stimulating cathartics; in the use of bitters and chalybeates, assisted by the cold bath.

OF INSANITY.

It is distinguished into melancholia and mania; the first is insanity with sadness, the mind generally resting on one object: the second accompanied with ungovernable fury; in some insanity is continued, in others it is periodical.

Melancholia is most frequent in the dull and studious, and those who have suffered by repeated misfortunes and disappointments.

Mania is more frequent with those who are irascible, cheerful, young, sanguineous, plethoric, and in some who have a dry tense animal fibre.

The remote causes may be referred to the following:

1. The mind too intensely directed to one object, passions of the mind, such as grief, sadness, fear, joy, hope, and more especially love, false terrors of the deity,

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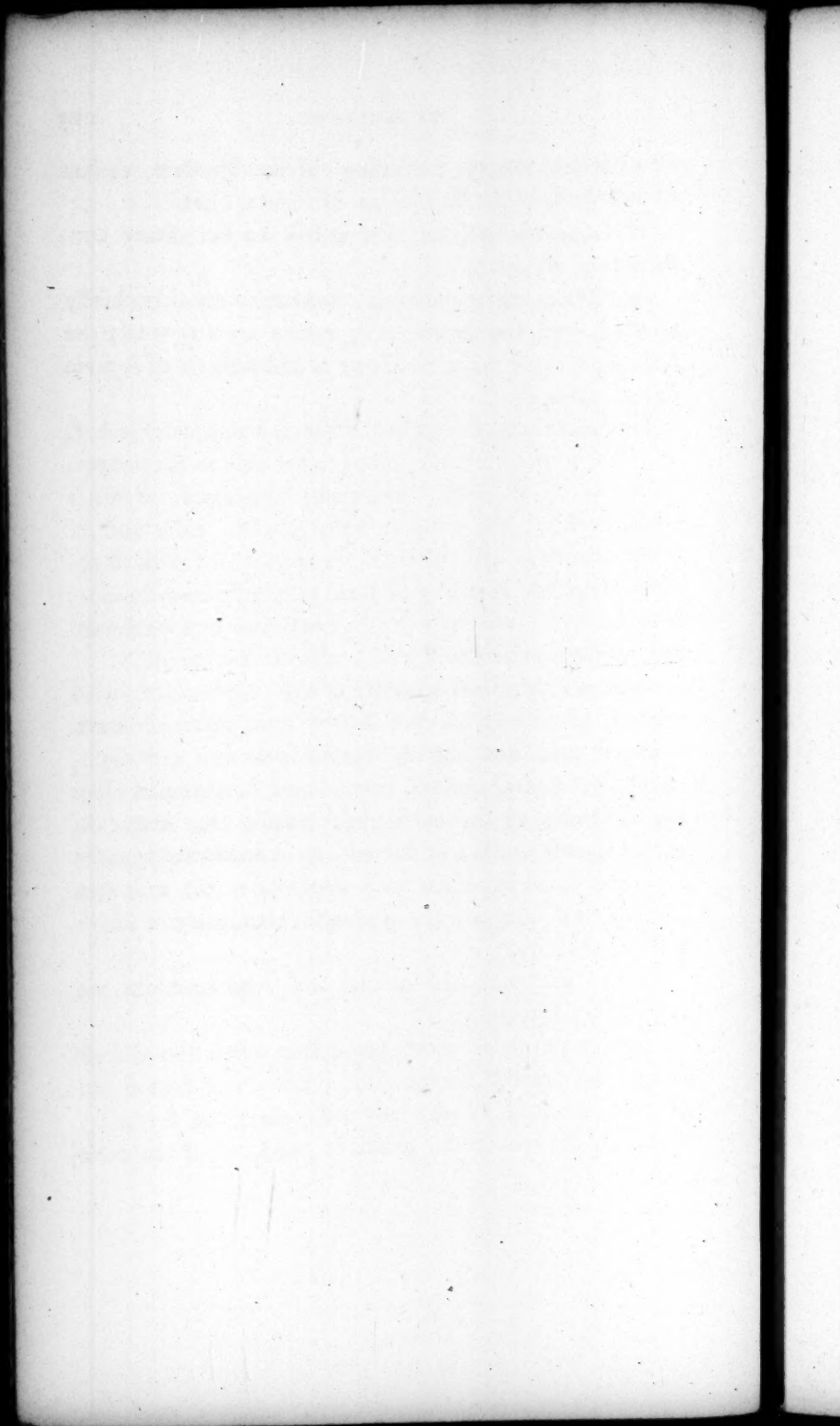
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immoderate venery, preceding febrile disorders, violent evacuations, or the suppression of natural ones.

A sedentary life, and frequently an hereditary conformation of parts.

In cases of melancholia the alimentary canal is chiefly affected, and the predisposing causes are frequently the same with those taken notice of in the subjects of *hysteria hypochondriasis*.

In melancholia the patient is timid, watchful, dejected, addicted without a cause to anger, variable in his temper, solicitous about trifles, sometimes avaricious; at other times profuse; the body is costive, urine pale, and in small quantity, oppression on the præcordia, with flatulency, frequent vomiting of acrid bile, pale countenance, slow pulse, a keen appetite, a credulous and perverted imagination, anticipating evils, followed by suicide.

In *mania* there is a wildness of the countenance, with redness of the eyes, the habits and manners much changed, pride and hatred, watchfulness day and night, head-ach, *tinnitus aurium*, immoderate laughing, violent anger, producing the most ungovernable rage either directed against another or himself, an immoderate appetite for venery, an exposure with impunity to the extremes of cold and hunger; the paroxysm terminates in stupor and melancholy.

In the paroxysm the animal and vital functions are remarkably vigorous.

The prognosis is more favourable when the disease arises from suppressed evacuations, than from long habits of intemperance; or from any indisposition of the body, than in cases where the health is good, while the mind

is only affected. It is better to have the excess of joy than sadness.

In many cases the disease is moderated, and in some removed by hæmorrhagy, diarrhœa, scabby eruptions, hæmorrhoidal evacuations, and the menstrual discharge.

There is no confidence to be placed in remissions, especially of hereditary mania.

The intention of the physician is to diminish the impetus, and quantity of fluids sent to the head, and to keep up the other secretions.

The following are the rules of cure ;

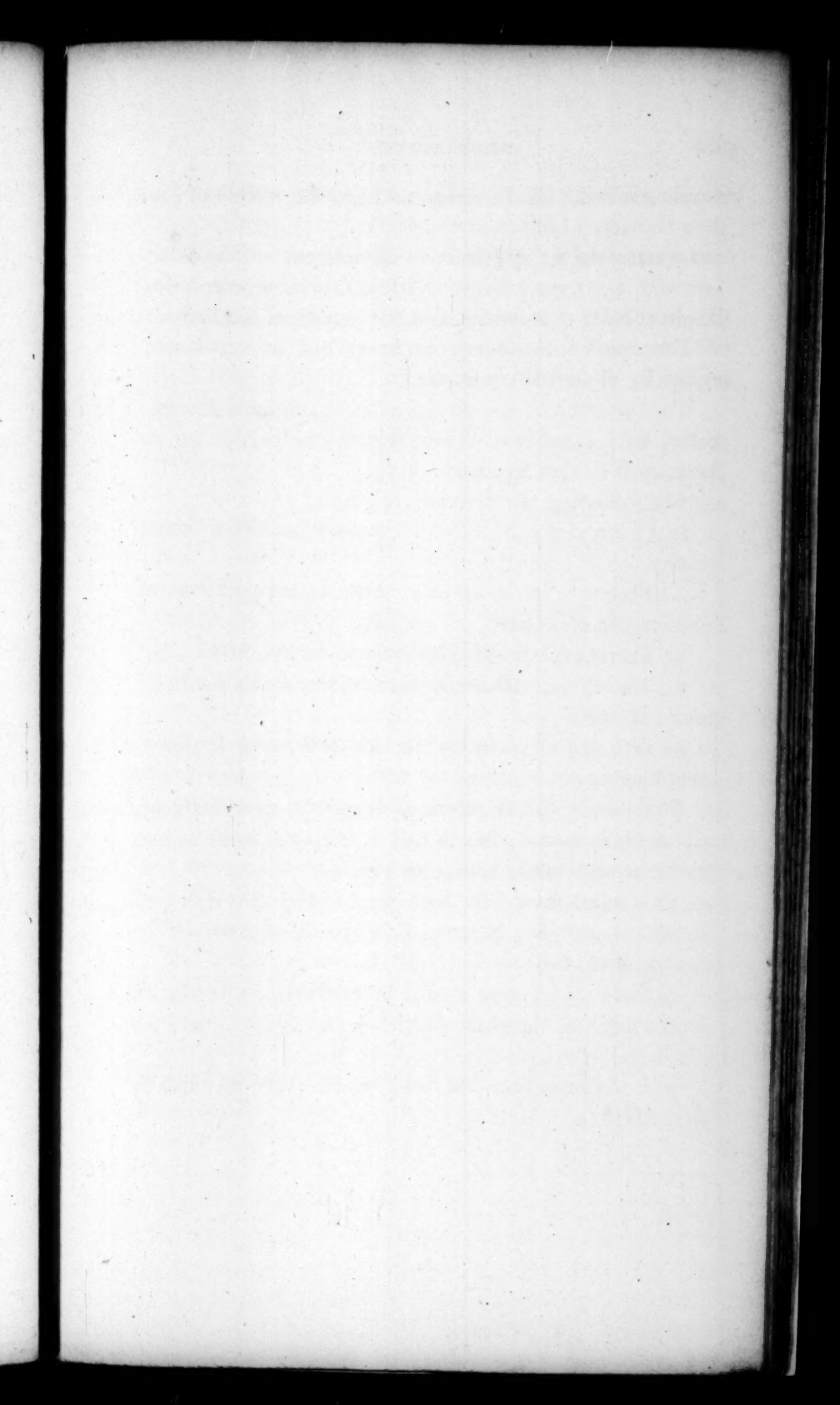
1. In cases of mania with plethora, especially to bleed freely.
2. To empty the *primæ viæ* by the united operation of emetics and purgatives.
3. To relieve the head by a seton on the neck.
4. To restore obstructed evacuations, or to substitute artificial ones.
5. In many cases to use the sea bath, and in some, cold bathing.

The diet should be diluting, vegetable, and ascetic, especially in mania ; but in this a reference must be had to the former habits of the patient.

The mind should be kept serene and cheerful, and moderate exercise ; perhaps a change of climate will be found adviseable.

In some cases sleep should be procured by anodynes, such as opium, camphor, Hoffman's anodyne liquor, and the like.

The *Stramonium* has been much recommended by Dr. Stork.



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The mind is to be governed according to the state of it.

In some cases, especially after acute diseases, a degree of idiotism comes on, which is removed by means which strengthen the habit.

OF THE VENEREAL DISEASE.

This disease arises from the immediate contact of a poison of a peculiar nature, especially with the mucous membranes, or an ulcerated surface.

It generally first acts on the part to which it is applied; it is sometimes, however, absorbed into the habit, and deposited by secretion on parts of the body which were not primarily or originally exposed to the infection, as the throat, the nose, the periosteum, the skin, &c.

The symptoms which arise from the action of this poison are various.

They differ frequently in their degree of violence, depending probably on the quantity or quality of the *virus*, the length of time which the parts have remained in contact with it, and the constitution of the patient.

There is no peculiar prophylactic which can be altogether depended on; the washing the parts immediately after coition with a little soap and water, or a diluted solution of the caustic alkali, by brandy or other stimulating fluid, will encrease the secretion of mucus from the parts, and thereby prevent the disease.

It may be distinguished into two heads,

1. As a local disease not yet absorbed into the system.

2. As a confirmed *lues*, in consequence of being absorbed by the lymphatic vessels, and conveyed to different parts of the body.

Gonorrhœa may be considered and treated successfully as a local disease; while the slightest ulcer, or symptoms of the disease occurring in remote parts of the body, should be treated as a confirmed *syphilis*.

In the gonorrhœa, a gentle, pleasing titillation is felt at the extremity of the *glans penis*, generally about the fourth day after coition with an infected person, a transparent lymph or mucus is discharged from the orifice of the urethra; there is a degree of redness surrounding the orifice, with fulness and tension of the *glans penis*; there is pain with a sense of heat in making urine, more especially felt about half an inch from the orifice of the urethra.

In a day or two there is a purulent fluid discharged and secreted from the inflamed surface of the *lacuna* of the urethra, the inflammatory symptoms sometimes extend along the whole surface of this membrane, even to the neck of the bladder; there is sometimes blood discharged with *pus*; there is frequently a chordé, or an involuntary and painful erection, with an incurvature of the penis.

These symptoms become milder; there is less pain in evacuating the urine; the purulent discharge, which was yellow and thin in the inflammatory stage, becomes whiter and thicker; the erections are not so frequent or painful; there is less tumor of the parts; the urethra becomes soft and flexible, and at last the discharge disappears, and the disease is removed.

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1. The first of the three main branches of the
theory of the origin of life is the theory of
spontaneous generation. This theory holds that
life can arise from non-living matter under
certain conditions. It was first proposed by
the ancient Greeks, and was later revived by
Lavoisier and Laplace in the 18th century.
It was then widely accepted until the middle of
the 19th century, when it was disproved by
Pasteur's experiments on the growth of
microbes. Since then, the theory of spontaneous
generation has been abandoned, and the theory
of evolution has become the dominant theory
of the origin of life.

2. The second of the three main branches of
the theory of the origin of life is the theory
of biogenesis. This theory holds that life
can only arise from pre-existing life. It was
first proposed by Pasteur in the 18th century,
and was later supported by the experiments of
Rudolf Virchow in the 19th century. It is now
the dominant theory of the origin of life.

3. The third of the three main branches of
the theory of the origin of life is the theory
of panspermia. This theory holds that life
can be transferred from one planet to another
by means of meteorites or comets. It was
first proposed by Laplace in the 18th century,
and was later revived by the discovery of
microbes in meteorites in the 19th century.
It is now a widely accepted theory of the
origin of life.

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The same symptoms occur in women, with some little variation, arising from the diversity in the structure of their organs.

It begins with an unusual increase of secretion, and a sense of irritation in the vagina; there are appearances of tumour and redness in the parts, which render coition painful; there is less difficulty in making water; the discharge appears equally purulent as in men, and it gradually disappears by an abatement of the discharge, and a diminution of the inflammatory symptoms.

The venereal *virus* acts by inflaming parts to which it is applied, and likewise possesses a power of assimilating with the animal *mucus*, and converting it into its own kind, as by a fermentable process.

The pus is secreted from an inflamed surface, very seldom ulcerated.

The inflammatory symptoms are generally proportioned to the degree of virulence and infection; symptoms similar to a gonorrhœa may be induced by other means which inflame the urethra, but the purulent discharge is not infectious.

The disease is milder in women, but often of more difficult cure than in men; the sooner the disease appears after infection, the more violent the symptoms of inflammation are; the more extensive it is, the more difficult is the cure.

The disease admits of a natural cure, favoured by dilution, an antiphlogistic regimen, and rest; this is, however, tedious and uncertain; therefore it may be equally and effectually cured by art.

The cure consists in diminishing the inflammatory symptoms, and sometimes exciting a greater action in the diseased parts.

The body should be kept soluble by cooling and laxative medicines, as sulphur, crystals of cream of tartar, the neutral salts, and the like.

The urine should be diluted by drinking plentifully of watery fluids, with gum arabic or other vegetable mucilages.

The irritation on the inflamed surface should be moderated by the use of injections, so mild as to produce little or no pain in the urethra; their first operation is often followed by an increase in the discharge, which afterwards abates and becomes thicker.

All the injections in common use are either of lead, copper, zinc, or mercury. The following formulæ are well adapted to the purpose.—*Vide Formul. Select.* No. 80, 81, 104, 105, &c. 199.

The prejudices against the use of injections, diluted to the degree of giving no pain, are ill founded, nor do they ever tend to convert a gonorrhœa into a confirmed *Lues*.

It frequently happens that after the virulent and inflammatory symptoms are gone, a considerable discharge takes place from the relaxation and debility of the parts; this is generally called a gleet; it gives way to the internal use of heating balsams; the use of bark, tonics and cold bathing, either topical or general. Many instances have occurred of its being removed by inducing inflammation in the parts, by bougies, cantharides, and some of the former injections less diluted, so as to excite much pain and symptoms of strangury.

The inflammation of the urethra, from its violence extending along the course of the *vasa deferentia*, from too much exercise, the use of stimulating injections, and other means increasing inflammation, induce an inflammation of the testicle, accompanied with much pain and tumour. This is to be removed by bleeding, purging, fomentations, and the antiphlogistic regimen; it is to be considered only as a case of local disease.

As the inflammation abates in the testicle, the running appears again from the urethra.

Vitriolated quicksilver, and other active emetics, frequently do much good in this disease. The venereal virus, either by irritating the extremity of the lymphatics going to the groin, or being conveyed to the glands, inflames and produces suppuration.

In this case, every possible means in the beginning should be employed to prevent suppuration, by promoting the resolution of the tumour, and when *pus* is formed it should be evacuated either by the caustic or the knife; this may sometimes be a local complaint, but it is always safer to treat it as a confirmed disease.

It is to be treated like any other inflammation which threatens suppuration.

The venereal virus is sometimes so acrid as to corrode the venereal vessel, and produces ulceration: such ulcers when occurring, more especially in the penis, or female parts of generation, are called *chancres*.

There first appears a red spot, somewhat elevated, like a miliary pustule, which is attended with a sense of heat and itching; it has a white head, and becomes a deep ulcer with a white callous edge, frequently spreading over a large surface, and becoming phagedenic.

This, in the slightest degree, should be considered as a confirmed lues, so that while we endeavour to heal it by topical applications, internal remedies should be employed.

A more favourable suppuration is frequently induced by the application of a solution of *Formul. Select.* No. 80, 110, 113.

Tumours of the præpuce and glans, distinguished into the *phymosis* and *paraphymosis*, are to be treated as inflammatory, still having in view the propriety of considering them as possibly complicated with the absorption of venereal virus, and therefore treating them as a confirmed disease.

In considering the *lues venerea*, we are to have a view to the seat of it, and the means of distinguishing it from other diseases.

It arises from the absorption of the poisonous matter into the circulating system, infecting the animal fluids, more especially attaching itself to the mucous and glandular parts of the body.

Its source is chiefly from a chancre or ulcerated surface.

Does the matter of *gonorrhœa* and *lues* essentially differ from each other?

The symptoms of *lues venerea* are so various, that it is difficult to describe them.

It attacks the palate, fauces, Schneiderian membrane, with inflammation, and ulcers spreading, and deeply seated, with white callous edges; deglutition is painful, the bones become carious, and the matter discharged is foetid and offensive.

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The patient complains of univerfal pain in the bones, efpecially about the middle of the tibia, increased by the heat of the bed; they abate towards the morning.— Sometimes tumour and fuppuration take place on the affected parts.

The fkin is frequently covered with broad round dry fpo,ts, of a brown or copper colour, eafily diftinguifhable from other eruptions; they are frequently diffufed over the whole furface of the body, but more efpecially in the forehead, and about the roots of the hair. There are fifsures in the palms of the hands, or foles of the feet, feparating an acrid and ichorous fluid.

Sometimes the fkin is inflamed, and ulcers arife, which fpread quickly over all the body. The glands of the body are indurated and obftruded, painful exoftofis arife, which fometimes fuppurate, and prefent underneath a carious bone. The bones are in fome brittle, in others foft and flexible.

The eye-lids are inflamed and ulcerate, and a chronic ophthalmia comes on; the organ of hearing is fometimes affected, and the bones of the ear have been rendered carious.

The animal and vital functions have been much impaired.

It fhould be diftinguifhed from other difeafes.

The cure of this difeafe can only be effected by the ufe of mercury, other means only proving ufeul by favouring its operation.

It may be employed either as an alterative, or as an evacuant.

It may be ufed in different forms,

1. By fumigation.

2. By triture externally, in the form of uncti^on, or internally, as divided by mucilaginous or powdery bodies.

3. As calcined by fire, in the form of *Hydrarg. calcinat.*

4. As united with acids, as in the form^o of *Hydrarg. muriat. calomel, &c.*

The most effectual practice is that by which the greatest quantity of mercury can be introduced into the habit, and kept in circulation for the longest time; this is best done by having recourse to uncti^on, so graduated in its quantity and mode of application, as to prove an alterative remedy.

Other preparations have their particular advantages, as calculated to act forcibly on particular parts of the body, and remove particular and urgent symptoms.

Salivation is not necessary to cure venereal complaints; it more frequently impedes than promotes the cure.

The practical rules for managing and conducting that process are to be explained.

A moderate degree of external wrath, the occasional use of the warm bath, and a mucilaginous, diluent, and antiphlogistic regimen should accompany salivation.

Mercury sometimes produces high symptoms of inflammation in the system, which are to be properly moderated.

The action of mercury may be promoted by the resinous woods, of guaiacum and sassafras; saraparilla and China root are likewise employed for the same purpose.

They are always found most serviceable when mercury has preceded their use.

The mezereon has been found to assist in removing exostosis.

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The Peruvian bark is given with great success in phagedenic and venereal sores, even where mercury has been found to injure the constitution of the patient.

A milk diet, and a change of air, are found beneficial in restoring the strength of a patient, reduced by the operation of mercury.—Vide *Formul. Select.* No. 104, 105, &c. &c.

FINIS.

The horizontal canal is given with three ampullae in the
vertical and horizontal planes, even when the eye has been
turned to right and left, and the position of the ampullae
is not changed. A small change of the position of the
ampullae is sufficient to change the position of the
ampullae in the vertical plane. This is the reason why the
ampullae are not in the vertical plane.

FIGURE 1